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The Influence of the Thyroid Gland on Polyploid Cell Formation in the External Orbital Gland of the Rat

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ABSTRACT The influence of the thyroid gland on the progressive accumulation of polyploid acinar nuclei in the rat external orbital gland was investigated. The numbers of polyploid nuclei were determined from nuclear size distribution curves, having first ascertained the correspondence between increased nuclear size and the polyploid state by microspectrophotometric determinations of the DNA in Feulgen-stained nuclei.

In the first experiment, the animals were kept 147 days, and controls showed increases in external orbital gland weight and polyploid cell formation with age. The presence of the thyroid was essential to these morphological changes, for they were prevented by thyroidectomy at 70 gm body weight. Treatment with thyroxine begun 103 days after thyroidectomy restored body and orbital gland weight gains and the formation of new polyploid cells. Treatment of thyroidectomized rats with growth hormone induced body growth, but failed to alter orbital gland weight and polyploidy. The action of thyroid hormone on orbital gland cells was therefore not mediated through its effect on the release of anterior pituitary growth hormone and this contrasts with previously reported results of polyploidy studies in the livers of these same animals.

A second experiment was designed to study the interrelationship of the bevered thyroid effect with the stimulatory action of testis hormone reported in the literature. The animals weighed 49 gm at the beginning of the experiment, their orbital glands weighed 54 mg and contained 41.0% polyploid nuclei. Eighty days after castration at 49 gm body weight, orbital glands weighed 153 mg and contained 88.9% polyploid nuclei of which 54.9% were above tetraploid size, whereas the glands of sham-operated controls weighed 214 mg and contained 91.5% polyploid nuclei of which 53.6% were above tetraploid size. Thus, the presence of the testis is not required for polyploid cell formation and orbital gland growth, although it can exert some stimulatory action in the course of normal development. On the other hand, thyroidectomy alone or thyroidectomy together with castration, prevented increases in gland weight or numbers of polyploid nuclei, again demonstrating the essential role of the thyroid. Treatment of thyroidectomized-castrates with thyroxine for 42 days, beginning 38 days after operation, led to the resumption of orbital gland weight gains (107 mg) and polyploid cell formation (91.4%) but treatment with testosterone did not. Thus, the thyroid control is independent of any concomitant testicular influence on these cells, whereas the stimulatory effect of testicular hormone requires permissive action of thyroid hormone.

In discussing these results, comparisons were made with the hormone control of liver growth and polyploidy and it was concluded that the formation of new polyploid cells is stimulated by those specific hormones which can promote cell division in liver parenchyma and external orbital gland acini. It was further noted that in both these tissues, there is an increase of basic nuclear size with age regardless of ploidy and that this nuclear growth also can be influenced by thyroid hormone.

The external orbital gland of the rat is a flattened oval structure tightly adhering to the dermis in positions varying from near the base of the ear to midway between the eye and ear. Histologically it consists of acini of the serous type. This gland has been called the exorbital lachrymal gland, the gland of Loewenthal (who first described it in 1895) and by Latin authors, the juxta, or supra or preparotid gland (reviews by Walker '58 and Baquiche '59).

It has also been mistaken for the parotid gland which is located just below it (see Baquiche, '59). In very young animals, the nuclei of its acinar cells are of uniform appearance, but before weaning, they begin to enlarge in progressively increasing numbers some attaining enormous sizes. This phenomenon has been shown to exhibit sexual dimorphism, enlarged nuclei being more numerous in glands from adult male albino rats than in those from adult fe-

males (Walker '58 Baquiche '59) Baquiche showed that the difference was due to male sex hormone since there were fewer large nuclei in castrated males and a greater number appeared after administration of testosterone to castrated males and to females. However it must be concluded that factors other than male hormone influence this phenomenon, since large nuclei begin to accumulate well before puberty and since they occur in females. Hormonal factors concerned with body and organ growth could conceivably exert an effect. Therefore the hypothesis that the thyroid gland might be implicated was examined, since it was shown to play a role in the accumulation of polyploid liver nuclei (Carrier '55 '62 Swartz, '60 Geschwind et al., '60).

It has been found that external orbital gland cells may show very wide mitotic metaphase figures corresponding in size to the large nuclei, and that such figures contain higher numbers of chromosomes than smaller metaphase figures corresponding in width to smaller nuclei. It was therefore concluded that the large nuclei were polyploid (Teir 44). In the present investigation the relative DNA content of individual interphase nuclei was determined microspectrophotometrically to establish on a firmer basis the correlation between nuclear size and ploidy. Once this was done the simpler technique of measuring nuclear sizes could be used to observe the changes in the relative numbers of polyploid nuclei in various experimental groups. The influence of the thyroid gland and its interaction with the testicular effect were studied in rats subjected to gland extirpations with and without hormone therapy.

MATERIALS AND METHODS

The first experiment was designed to find out whether the thyroid could influence the formation of polyploid nuclei in orbital gland cells. Ten 70 gm male Sherman rats were sham-operated and 50 were thyroidectomized; the latter were subdivided into three groups 103 days later and injected twice daily for 44 days with saline solution, or thyroxine, or growth hormone. The sham-operated rats received injections of saline solution. This group is referred

to as sham-operated age controls. Since growth ceases about two weeks after thyroidectomy sham-operated rats corresponding to the final body weight of the saline-injected thyroidectomized rats (106 gm) were also added and all animals were killed 147 days after the beginning of the experiment. They were housed under conditions of controlled light and temperature ($81 \pm 3^\circ\text{F}$). To insure complete thyroid deficiency they were fed the iodine deficient diet described by Leblond and Eartly ('52) and drank 1% calcium lactate in distilled water during the first three weeks following operation (to prevent tetany due to possible total parathyroidectomy) and distilled water thereafter. Injections were given at 12 hour intervals 3 $\mu\text{g/day}$ of Na di-thyroxine until the rats reached 100 gm body weight, and 6 $\mu\text{g/day}$ afterwards and, initially 100 $\mu\text{g/day}$ growth hormone (from the Connaught Laboratories Toronto Canada) with subsequent increases of the doses to maintain body weight gains. The growth hormone contained negligible TSH and ACTH contamination but it did contain some gonadotropic activity (Leblond and Carrier '55).

Completeness of thyroidectomy was verified (cessation of body weight gains, absence of acidophiles in pituitary sections, review by Eartly and Leblond, '54). Each group consisted of 6-8 animals at autopsy. Tissues were fixed in Orth's fluid, washed in 1% formalin, weighed, sectioned at 6 μ and stained with hematoxylin and eosin. Body external orbital gland and seminal vesicle weights were subjected to analysis of variance and t tests.

A second experiment was designed to study the interrelationship of the thyroid and testicular hormones in their action on orbital gland cells. Male Sherman rats weighing 49 gm at the beginning of the experiment were used. Eight were killed immediately to serve as initial controls (rather than use animals corresponding to the final weight of the thyroidectomized rats as in the previous experiment) 12

This experiment was carried out in the Department of Anatomy, McGill University, Montreal, Canada, and the bioassay work was completed in the Department of Biology, University of Montreal, with the aid of grants from the National Research Council of Canada, to Prof. C. F. Leblond and to R. Carrier. The author gratefully acknowledges her indebtedness to Prof. C. F. Leblond.

were thyroidectomized, 12 were castrated, 52 were thyroidectomized and castrated and ten were sham-operated. After 38 days the doubly operated rats were subdivided into 4 groups to be injected twice daily with either saline solution, or thyroxine, or testosterone, or both hormones together. The dosages were as follows: 1.5 μ g/day of thyroxine for ten days, then 3 μ g/day for the rest of the experiment, and 250 μ g/day of testosterone (in 1% Duponol) for ten days and 500 μ g/day afterwards. The animals were kept a further 42 days in quarters adjusted to $78 \pm 3^\circ \text{F}$. They were fed a commercial iodine deficient diet supplemented with 10% brewer's yeast and 1% pig liver (all from Nutritional Biochemicals Corp. Cleveland, O). They drank 1% calcium lactate in distilled water during the first four weeks, and distilled water thereafter. Three weeks before the end of the experiment, respiratory infections spread among the animals those which were severely ill were eliminated and all others were given daily injections of 6 000 units of Combiotic (penicillin G and dihydrostreptomycin, Pfizer and Co.) for four days. At the end of the experiment, although most groups consisted of 8-10 animals there were only four in three of the groups, the sham-operated age controls, the doubly operated rats receiving thyroxine and those receiving both hormones together. The orbital glands, seminal vesicles, and several other organs were fixed in Bouin's fluid for 24 hours, washed in 70% alcohol, weighed, sectioned at 6 μ and stained with hematoxylin and eosin.

Histometric procedures

Nuclear sizes were measured at 1,000 \times magnification in 200 acinar cells per animal taking the average of two diameters per nucleus, selecting all clearly outlined nuclei in eight randomly chosen areas per section. A Leitz screw micrometer having 29 divisions per μ was used. Many cells contained two nuclei; these were found to be of the same size range as nuclei in mononucleated cells and so they were included in the measurements. Nuclear size frequency distribution curves were prepared for each animal and it was found that the range of sizes for the various

glands within an experimental group corresponded well and could be combined to plot the average distribution for each experimental group as a whole.

On examination of the histograms for experiment 1 it was found that the nuclear size classes were not clearly delineated (fig. 2) and these curves were not analyzed further than to observe simply whether treatment altered the nuclear size distributions, i.e. whether it increased or decreased the numbers of nuclei in the larger size range. Before carrying out the second experiment, several fixatives (Zenker, Carnoy, Bouin formalin) were tested, and Bouin's fluid was selected because it preserved the nuclei in a more regularly spherical shape. As a result, the size ranges for diploid and tetraploid nuclei were clearer (first curve of figure 3 as compared with the first curve of fig. 2) and the histograms for experiment 2 could be analyzed mathematically to express the results on a more quantitative basis. The probability graph technique for analysis of polymodal curves (Harding 49, Kasten, '55, Carriere and Patterson, '62) was used to find the point marking the limit between diploid and tetraploid sizes in the average histogram for each experimental group (table 1). The percentage of nuclei beyond this nuclear size point, i.e., the percentage of polyploid nuclei, was determined for each individual animal, and the average percentage of polyploid nuclei for each experimental group could then be calculated and subjected to analysis of variance and t tests. Changes in the number of nuclei beyond the tetraploid range were of interest in two of the groups. Therefore their probability graphs were used to find the limit between tetraploid nuclei and those of larger diameter; the numbers of nuclei beyond this point were determined for individual animals, and the average for each group was then calculated. The graphical analyses also allowed the determination of the average diploid and tetraploid diameters. As with liver nuclear sizes (table 1 in Carriere and Patterson '62) all these values corresponded well with results obtained by simple inspection of the size distribution histograms, visualizing each peak as a bell-

males (Walker '58; Baquiche '59) Baquiche showed that the difference was due to male sex hormone, since there were fewer large nuclei in castrated males and a greater number appeared after administration of testosterone to castrated males and to females. However it must be concluded that factors other than male hormone influence this phenomenon, since large nuclei begin to accumulate well before puberty and since they occur in females. Hormonal factors concerned with body and organ growth could conceivably exert an effect. Therefore the hypothesis that the thyroid gland might be implicated was examined, since it was shown to play a role in the accumulation of polyploid liver nuclei (Carrieré '55 '62; Swartz, '60; Geschwind et al '60).

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ately preserving their relative numbers. Our aim being only to ascertain that the large nuclei contained polyploid amounts of DNA, the above determinations were considered a satisfactory indication that nuclear size distributions could be used to count polyploid nuclei in tissue sections.

From the nuclear size distribution for young normal rats (fig 3 first curve) and from the values obtained from the probability graph analysis (table 1) it is seen that: diploid and tetraploid nuclei overlapped at 6.5μ ; diploid nuclei averaged 5.7μ in diameter; tetraploid nuclei ranged up to 8.2μ and had an average diameter of 7.2μ . As a matter of interest, the volume of a sphere of 5.7μ diameter was calculated and found to be $96.7 \mu^3$. The diameter of a sphere twice this volume ($193.5 \mu^3$) and hence, the expected tetraploid diameter was calculated and found to be 7.2μ . In the older animals (second curve fig. 3) all values have shifted to the right, nuclei of a given ploidy were slightly larger e.g. tetraploid nuclei now averaged 7.8μ in diameter (fig 3 and table 1). The volume of a sphere with this diameter is $247.3 \mu^3$. Volumes half and twice this size $123.6 \mu^3$ and $494.6 \mu^3$ respectively give calculated diameters of 6.2 and 9.8μ for diploid and octoploid nuclei. These values are in keeping with the shape of the size distribution curve.

Since the nuclei were measured in 6μ sections, and nuclear sizes ranged up to 15μ or more, possible distortion of the true size frequency distributions by the presence of sectioned fragments of the largest nuclei must be considered. The larger fragment of a sectioned nucleus will of course include the equator and give the true diameter. The smaller fragment, on the other hand, may be cut very near the nuclear pole and would then show very light staining, little depth, and an indistinct nuclear membrane such fragments can be excluded from the measurements. With smaller nuclei such as those in the diploid and tetraploid size range unrecognized fragments are not sufficiently smaller than the equator to cause significant error in the size frequency distribution curve (for discussion, see Carriere and Patterson, '62). However it is conceivable that fragments of the largest nuclei may be cut far enough from the pole to remain unrecognized and yet still be far enough from the equator to have a significantly smaller diameter and appear among the diploid or tetraploid nuclei in the size distribution curves. To estimate the magnitude of such error a gland from an adult rat was sectioned at 6μ and at 20μ , and nuclei were measured in both sections. The size distributions may be compared in figure 1 the thicker section appeared to

INFLUENCE OF SECTION THICKNESS ON NUCLEAR SIZE DISTRIBUTION

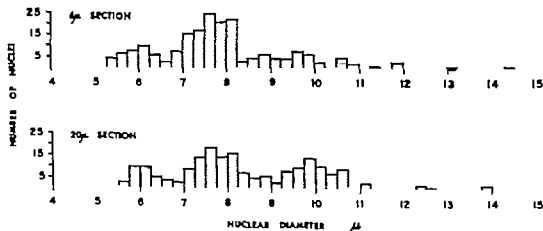


Fig. 1. The nuclear size distributions in 6 and 20μ sections of an external orbital gland from an animal in the group of sham-operated age controls in experiment 2 (body weight, 200 gm)

contain fewer tetraploid nuclei and relatively more of higher ploidy. It is obvious from the lack of significant change within the diploid range i.e. up to 6.5μ that fragments of diameter below 6.5μ can be recognized and excluded. Hence the percentage of diploid nuclei, or inversely the percentage of polyploid nuclei, the value of interest in this investigation will not be affected.

RESULTS AND CONCLUSIONS

Experiment 1

The size distribution for the orbital gland nuclei of sham-operated 106 gm rats (fig. 2) showed a range from roughly 4μ up to 10μ with most nuclei falling between 4.5μ and 6.5μ , and with the possibility of two widely overlapping peaks in this interval. As the rats grew to 374 gm body weight, the orbital glands increased in weight (table 2) nuclei were found to extend their size range up to 13μ and a large proportion shifted away from $4.5-5 \mu$, towards 8μ in diameter. The numbers of polyploid nuclei had increased. Thyroidectomy prevented body growth (table 2) and the age changes seen in the orbital glands of normal rats did not take place as may be seen from figure 2, where the nuclear size distribution is essentially the same as that of the younger sham-operated rats of similar body weight. Injections of thyroid hormone begun 103 days after thyroidectomy and continued for 44 days, increased body weight, orbital gland weight (table 2) and the numbers of nuclei in the larger size range (fig. 2, fourth curve). To test whether this effect was associated with the action of thyroxine on the release of pituitary growth hormone thyroidec-

tomized rats were given growth hormone injections. Body weight increased significantly but the external orbital glands showed no weight gains (table 2) and the numbers of polyploid nuclei were not augmented (fig. 2).

Thus thyroid hormone appeared to be essential to orbital gland growth and to the formation of polyploid acinar nuclei. This effect was independent of thyroid action on the release of growth hormone from the anterior pituitary. It is not clear from this experiment whether or not the thyroid hormone can act independently of the influence exerted by the testis reported in the literature (Baquicho '59).

Experiment 2

The problem of the interaction of the effect of thyroid and testicular hormones on orbital gland cells was investigated in experiment 2, and the results are summarized in table 3 and figures 3 and 4. The fact that the relative numbers of polyploid nuclei increase with age may again be observed and in this case the histograms gave a clearer picture of ploidy distributions. In the 49 gm rats diploid and tetraploid nuclei formed two clear peaks overlapping at 6.5μ (fig. 3 first curve). At 269 gm body weight (fig. 3 second curve) the overlapping point was 6.7μ and most nuclei were beyond this i.e. polyploid nuclei had increased and the relative numbers of diploid nuclei were greatly reduced. Tetraploid and octoploid nuclei predominated but were then also many much larger nuclei. There were only 41.0% polyploid nuclei in the glands of the 49 gm rats whereas there were 91.5% in those of the 269 gm rats (table 3).

TABLE 2

Experiment 1 The influence of the thyroid on body, external orbital gland and seminal vesicle weights

Experimental groups	Body weight	External orbital gland weight	Seminal vesicle weight
Initial body weight: 70 gm Killed: 147 days after operation Injections: last 44 days			
	gm \pm S.E.	mg \pm S.E.	mg \pm S.E.
Sham-operated rats (weight control)	106.0 \pm 2.7	129.5 \pm 7.2	36.0 \pm 2.0
Sham-operated age controls	373.6 \pm 11.0	258.6 \pm 21.7	265.4 \pm 38.2
Thyroidectomized rats	105.7 \pm 5.7	66.5 \pm 7.3	39.4 \pm 7.4
Thyroidectomized + thyroxine	215.8 \pm 6.4	201.2 \pm 21.9	267.8 \pm 14.7
Thyroidectomized + growth hormone	151.1 \pm 6.1	68.5 \pm 10.5	90.5 \pm 16.3

Seminal vesicle weights are included to allow assessment of testicular hormone activity

EXPERIMENT 1 NUCLEAR SIZE DISTRIBUTIONS

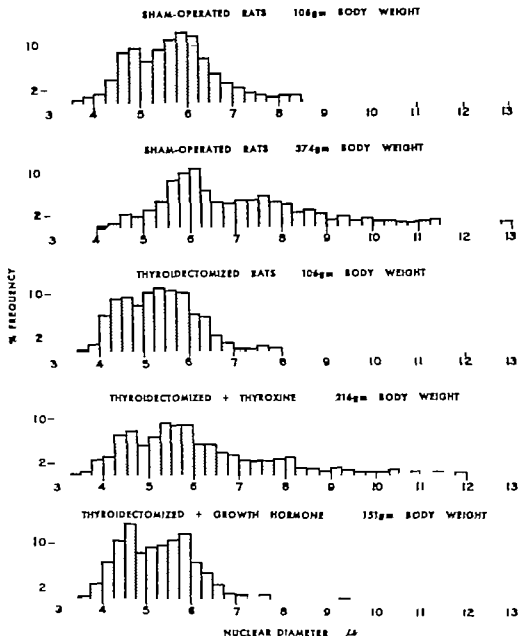


Fig. 2 Nuclear size distributions for the external orbital glands in experiment 1. The first curve represents the distributions for young sham-operated animals of body weight corresponding to the final body weight of untreated thyroidectomized rats; the second curve, that of sham-operated rats kept throughout the experiment, serving as μ controls; the other three curves illustrate the effect of thyroid extirpation in young animals, and of hormone treatments begun 103 days after operation and continued for 44 days.

EXPERIMENT 2 NUCLEAR SIZE DISTRIBUTIONS

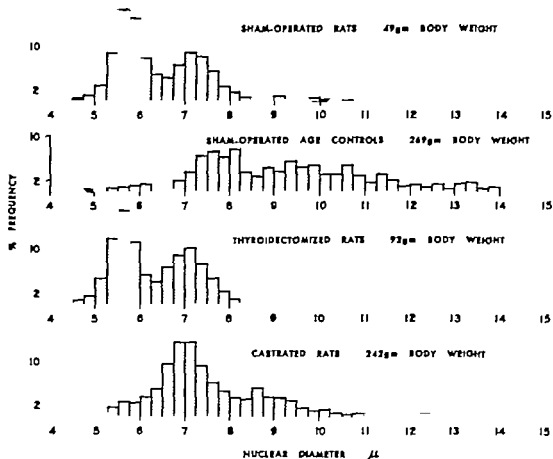


Fig. 3 Experiment 2, nuclear size distributions illustrating the influence of thyroidectomy or castration on nuclear size distributions in the external orbital gland. The 49 gm sham-operated rats illustrate conditions at the beginning of the experiment, or the time of operation and the sham-operated age controls were kept throughout the experiment, 80 days.

In the glands of thyroidectomized rats there were 45.3% polyploid nuclei, which was not significantly different from the 41.0% found in the initial controls the sham-operated 49 gm rats. Thyroid lack again prevented the accumulation of new polyploid nuclei. It should be noted that the tetraploid nuclei present at the time of gland extirpation remained intact, in contrast to the loss of tetraploid-sized nuclei seen in the liver (Carrieré, '62) under such conditions.

Castration at 49 gm body weight did not prevent the growth of the gland (table 3)

nor the formation of new polyploid nuclei, for they increased to 88.9% (table 3). However the degree of polyploidy was reduced in comparison with sham-operated rats of the same age. Total polyploid nuclei were similar in numbers (91.5% in the sham-operated age controls and 88.5% in castrates table 3) but there were only 24.9% of nuclei above tetraploid size in the castrated rats whereas there were significantly more 53.6% in the sham-operated age controls. Testis lack therefore did interfere with polyploid cell formation to some extent.

EXPERIMENT 2 NUCLEAR SIZE DISTRIBUTIONS

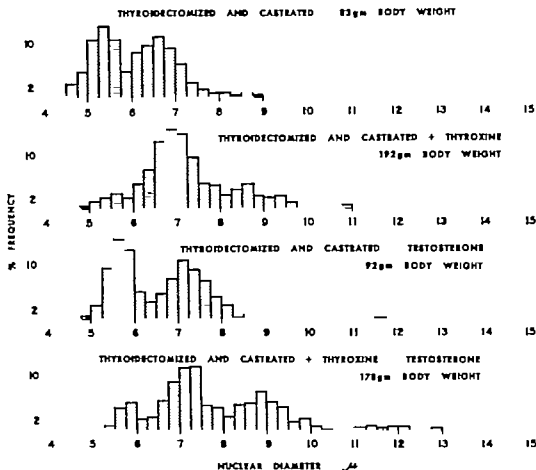


Fig. 4 Experiment 2, nuclear size distributions in the external orbital gland following thyroxine or testosterone treatment of thyroidectomized castrates. Injections were begun 38 days after gland extirpation and continued for 42 days. The curves serving as sham-operated controls for these are those shown in figure 3.

The combination of castration with thyroidectomy yielded results (table 3 and fig. 4 first curve) similar to thyroidectomy alone in that there was no significant difference in gland weight or in the numbers of polyploid nuclei. However in comparison with the sham-operated 49 gm rats there was a slight increase in polyploidy and this was found to be statistically significant ($P=0.02-0.01$). These few new polyploid nuclei may well have been formed in the immediate post-operative period before complete thyroid deficiency

was established (Leblond and Early '52). Treatment of the doubly operated rats with thyroxine increased the numbers of polyploid nuclei to 91.4% (table 3) and it can be concluded that the presence of testicular hormone is not necessary for the action of thyroid hormone on the orbital gland cells. However treatment of the doubly operated rats with testosterone failed to increase gland weight, or the numbers of polyploid nuclei, over the values found in saline-injected doubly operated rats (table 3 and fig. 4 third curve). Both hormones to-

EXPERIMENT 2 NUCLEAR SIZE DISTRIBUTIONS

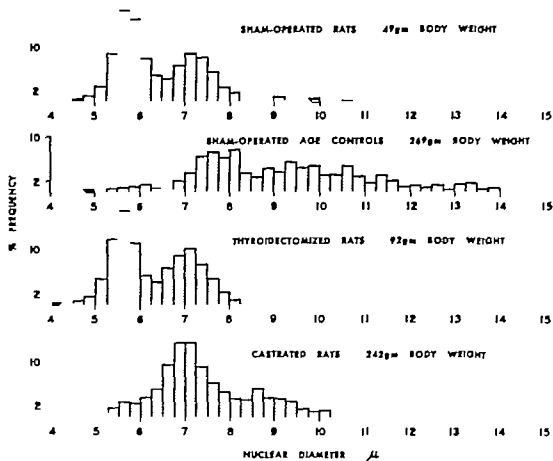


Fig. 3 Experiment 2, nuclear size distributions illustrating the influence of thyroidectomy or castration on nuclear size distributions in the external orbital gland. The 49 gm sham-operated rats illustrate conditions at the beginning of the experiment, or the time of operation and the sham-operated age controls were kept throughout the experiment, 80 days.

In the glands of thyroidectomized rats there were 45.3% polyploid nuclei, which was not significantly different from the 41.0% found in the initial controls the sham-operated 49 gm rats. Thyroid lack again prevented the accumulation of new polyploid nuclei. It should be noted that the tetraploid nuclei present at the time of gland extirpation remained intact, in contrast to the loss of tetraploid-sized nuclei seen in the liver (Carrieré '62) under such conditions.

Castration at 49 gm body weight did not prevent the growth of the gland (table 3)

nor the formation of new polyploid nuclei for they increased to 88.9% (table 3). However the degree of polyploidy was reduced in comparison with sham-operated rats of the same age. Total polyploid nuclei were similar in numbers (91.5% in the sham-operated age controls and 88.5% in castrates, table 3) but there were only 24.9% of nuclei above tetraploid size in the castrated rats whereas there were significantly more 53.6% in the sham-operated age controls. Testis lack therefore did interfere with polyploid cell formation to some extent.

were fewer following castration, and their numbers were increased by the administration of testosterone (Walker '58 Baquiche '59). The experiments reported here showed on a quantitative basis that castration retarded but did not prevent, polyploid cell formation. New polyploid cells did arise in the absence of the testis and so its hormone is not essential to the process, and its stimulatory effect is not of the same magnitude as that of thyroid hormone. Furthermore a permissive action of thyroid hormone was found necessary for the response of orbital gland cells to testosterone, since polyploid nuclei did not increase in number when testosterone was injected to thyroidectomized-castrates in doses adequate to cause full growth of the seminal vesicles (table 3). On the other hand, orbital gland cells did not require an influence of testicular hormone to respond to thyroxine, for thyroxine injections promoted polyploid cell formation and orbital gland weight gains in thyroidectomized-castrates.

Our results clearly show then, that thyroid hormone is a major factor in the control of polyploid cell formation in the rat external orbital gland.

B The relationship between growth and polyploid cell formation

The formation of larger polyploid cells appears, in general, to be associated with growth of the gland (tables 2 and 3). Experimental interventions retarding polyploid cell formation also interfered with weight gains, whereas gland weight increased following procedures (such as castration, thyroxine injection) allowing or stimulating polyploid cell formation. The relationship is further emphasized by the fact that treatment of thyroidectomized rats with growth hormone, which failed to elicit weight gains and polyploid cell formation in the external orbital glands increased both weight and polyploidy in the livers of the same animals (Carriere, '62). Parenthetically this is an interesting example of target organ specificity — external orbital gland cells did not respond to growth hormone at least not in terms of the processes considered here.

The parallelism between gland weight and the relative numbers of polyploid cells

is not a strict one however. When values for individual rats within an experimental group were examined, the heaviest glands did not necessarily contain the highest numbers of polyploid nuclei. The relationship is apparent only upon comparing the average values for the various experimental groups. Moreover both Walker ('58) and Baquiche ('59) reported that as adult male albino rats grow older typical exorbital gland acini — with polyploid nuclei, tall pyramidal cells and canalicular lumen — are replaced to some extent by acini similar to those found in the Harderian gland with cuboidal epithelium, large vesicular lumen, and nuclei of uniformly small size (presumably diploid). Walker showed that as the rats grew from 278 to 376 gm body weight (roughly through 900 days from the age of three months) the numbers of Harderian acini increased. This change in the nature of the tissue places a limit on the generalization that polyploid nuclei increase in number with age or gland weight. In this connection, it should be noted that following treatment of thyroidectomized-castrates with testosterone in the present study there appeared to be a change in the structure of some acini toward the Harderian type. This involved increases of lumen size together with decreased cell height, giving forms intermediate between the two types. There were few if any typical Harderian acini. No attempt was made to count the numbers of acini undergoing such transformation and a subjective estimate suggests they constituted about one tenth of the tissue.

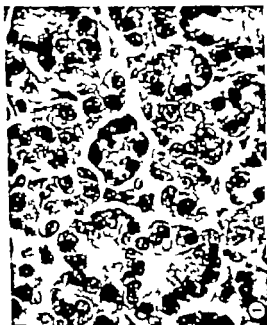
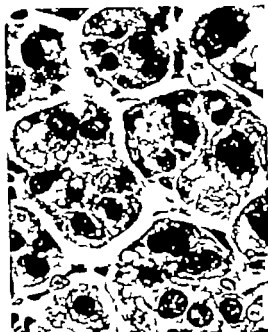
In liver (Carriere '62) there is also a parallelism between organ weight and the relative numbers of polyploid nuclei but again, this relationship is not a strict one. For example, following thyroidectomy in juvenile (but not adult) rats the numbers of polyploid nuclei were gradually reduced and diploid nuclei were correspondingly increased, while liver weight remained unchanged. No such reduction was seen in the external orbital glands of these animals. Also, treatment of hypophysectomized rats with growth hormone increased liver weight and polyploidy but the numbers of polyploid nuclei increased more

PLATE 1

EXPLANATION OF FIGURES

Rat external orbital glands from experiment 2, Bouin fixation, hematoxylin and eosin staining, $\times 500$.

- 1 Gland from a 48 gm sham-operated rat. The nuclei are fairly uniform in size, for only two classes, diploid and tetraploid, are present in significant numbers.
- 2 Gland from a 269 gm sham-operated rat. Few diploid acinar nuclei remain, and nuclei of very high degrees of ploidy have been formed.
- 3 Gland from a rat thyroidectomized and castrated at 49 gm body weight, and kept 80 days afterwards.
- 4 Gland from a rat thyroidectomized and castrated at 49 gm body weight, and treated with thyroxine for 42 days, beginning 38 days after operation.



THYROID IN ORBITAL GLAND POLYPLOIDY
Rita Carlsberg



A Relationship Between Fine Structure and Function of Blood Vessels in the Central Nervous System of Rabbit Fetuses¹

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ABSTRACT The central nervous system of rabbit fetuses from the ninth to the twentieth day of gestation has been examined by phase contrast and electron microscopy. Blood vessels are first seen in the neuroectodermal tissue at 11 days of gestation. They increase in number between 11 days and 20 days of gestation but there is no change in their fine structure. The endothelial cells usually have voluminous cytoplasm which forms projections into the lumen of the vessels. These projections or flaps are a prominent feature of the fine structure of the endothelial cells during this period of growth of the central nervous system. Their function appears to be the impounding of material from the blood stream by curving over and coalescing with the plasma membrane, thus forming large vesicles. Thorium dioxide injected into the blood stream, is taken up along with the constituents of the plasma and is seen in the large vesicles formed by the flaps, as well as in smaller vesicles formed directly from the luminal plasma membrane by the usual mechanism of pinocytosis. Flaps are usually located at the terminal bars. Thorium dioxide is not seen between the thickened cell membranes that form the terminal bar but is present in vesicles adjacent to the terminal bar.

Studies with the electron microscope have disclosed new details of capillary structure. Bennett, Luft and Hampton ('59) have suggested a morphological classification of blood capillaries in the various organs of vertebrates based on the structure of the endothelial cell on the presence or absence of a continuous basement membrane and on the presence or absence of a complete investment of pericytes. They suggest that these varying structural features of the capillary may be relevant to problems relating to exchange of materials between blood plasma and parenchymal cells.

In the adult central nervous system the capillaries have a continuous basement membrane. The endothelial cells form a continuous lining without fenestrations or pores and the basement membrane is surrounded by glial cells and glial cell processes (Dempsey and Wislocki, '55; Luse '56). In the cerebral cortex of the immature rat the capillary basement membrane is discontinuously present and is of variable width and density. The endothelial cells have no pores or fenestrations and their cytoplasm is voluminous. The base-

ment membrane is completely surrounded but here nerve cells as well as glial cells take part in the investment (Donahue and Pappas, '61).

The present report describes blood vessels in the midbrain and spinal cord of rabbit fetuses from their first appearance at 11 days after mating, until the twentieth day after mating. This is a period of rapid growth in the central nervous system of the fetus.

MATERIALS AND METHODS

Dutch rabbits in which the period of gestation was usually 30 days were employed. The age of the fetus was calculated from the time of mating. The dams were anesthetized with sodium pentobarbital, a midline abdominal incision was made and the uterus was located. Small incisions were made in the uterine wall

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away from the placental sites. The beating hearts could be seen with a dissecting microscope, and a small amount of Thorotrast (Testagar and Co. Inc. 24 to 26% stabilized colloidal thorium dioxide by volume 25% aqueous dextrin and 0.15% methyl paraeop as a preservative) approximately 0.05 cm³ was injected directly into the heart of some of the fetuses. These were then wrapped in warm saline-soaked gauze and replaced in the abdominal cavity with the fetal circulation intact. They were removed for fixation 5 to 15 minutes later when the fetal hearts appeared to be failing. Other fetuses were removed and fixed immediately.

After cutting the umbilical cord the fetuses were placed in a pool of 2% buffered osmium tetroxide (Palade, '52). They were then dissected and blocks of spinal cord and midbrain approximately 1.0 mm thick, were further fixed in cold buffered osmium tetroxide for 30 minutes to one hour. They were then rapidly dehydrated (Ito '61) and embedded in Epon 812 (Luft, '61).

Tissues thus obtained from fetuses removed at 9 9¼ 10¼ 11 11¼ 12¼ 14 14¼ 17 17¼ 18¼ 19¼ and 20 days after mating were sectioned with glass knives, on a Porter Blum microtome. Thick sections were examined with a phase contrast microscope. Thin sections were stained with lead after the methods of Karnovsky ('61) and Millonig ('61) and examined in an RCA 3C or Siemens Elmiskop 1 electron microscope.

OBSERVATIONS

Blood vessels are not present in the neuroectodermal tissue of fetuses younger than 11 days although they are occasionally seen before then in the surrounding connective tissue. There is a rapid increase in the number of vessels per unit area, as shown in figure 1 (phase contrast microscope picture of the spinal cord of an 11¼ day fetus) and figure 2 (phase contrast picture at the same magnification of a 14 day fetus). The fine structure of the blood vessels of the nervous system does not change during the developmental period studied i.e. from day 11 to day 20 after mating. The close approximation of the plasma membranes of the neuro-

ectodermal cells can be seen in figure 3 (arrows). The dense area between endothelial cells and neuroectodermal cells defined as the basement membrane is present discontinuously and varies in thickness and density (fig 3). In areas devoid of basement membrane the distance between the plasma membrane of the endothelial cell and that of the neuroectodermal cell is the same as the distance between the plasma membranes of neuroectodermal cells. Pericytes cells which in the adult are fully enclosed by the basement membrane but do not participate in the formation of the luminal surface are difficult to define at this stage of development, since the basement membrane is incomplete. In figure 3 (a blood vessel of a 14 day fetus) Thorotrast injected intracardially nine minutes before fixation, is seen as granules of thorium dioxide in a large vesicle (LV) in a cell process adjacent to the endothelial cell. This is probably the process of a pericyte since it is partially enclosed by basement membrane.

The cytoplasm of the capillary endothelial cell in the central nervous system of these fetuses is usually voluminous and contains numerous organelles. The perinuclear Golgi apparatus is prominent. The terminal bars are long and often tortuous. A conspicuous feature of these cells is the projection into the lumen of flaps or flanges usually located adjacent to the terminal bars. These flaps are larger and are seen more frequently than in capillaries in the adult central nervous system (Donahue and Pappas, '62). Their function appears to be the impounding of material from the blood stream by curving over and coalescing with the plasma membrane of the luminal surface of the endothelial cells thus forming large vesicles.

When thorium dioxide is introduced into the circulation it adheres to the cell surfaces (figs 3 4 5 6) of the endothelial cells and of the circulating blood cells. Particles are taken up by pinocytosis (Palade '53) i.e. by invaginations from the endothelial cell surface forming small vesicles (fig. 4 arrow). In addition large vesicles containing thorium dioxide are formed by the flaps coalescing with the luminal cell surface as seen in figure 6.



Fig. 1 Phase contrast micrograph of the spinal cord of a rabbit fetus eleven and three-quarter days after mating. Cells of the spindyl layer (E) line the neural canal present on the left of the micrograph. One blood vessel (BV) is shown in the center and blood cell (BC) is seen in blood vessel in the mesenchyme at the upper right. $\times 810$.

Fig. 2 Phase contrast micrograph of the spinal cord of 14 day rabbit fetus at the same magnification as figure 1. Four blood vessels (BV) are shown. Cells of the spindyl layer (E) line the neural canal at the upper left of the micrograph. $\times 810$.

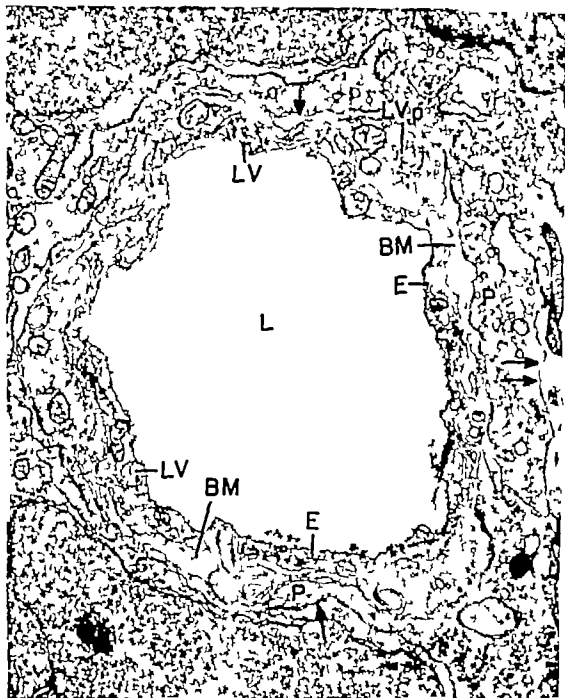


Fig. 3 A capillary in the spinal cord of rabbit fetus 14 days after mating. The close approximation of the plasma membranes of the neuroectodermal cells can be seen (arrows). Dense material forming the basement membrane (BM) is seen between the endothelial cells (E) and the processes (P) of the neuroectodermal cells. The basement membrane is discontinuously present and is of variable thickness and density. Where it is not present the distance between the cell membrane of the endothelial cell and the cell membrane of neuroectodermal cells is approximately the same as the distance between neuroectodermal cells (arrows). Thorium dioxide particles injected nine minutes before fixation, are present in the lumen (L) in many places adherent to the luminal surface of the endothelial cells. Large vesicles (LV) containing thorium dioxide particles are seen in the endothelial cell cytoplasm. One large vesicle (LV) is present in a cell that is probably pericyte as it is partially enclosed by basement membrane. $\times 23,000$.

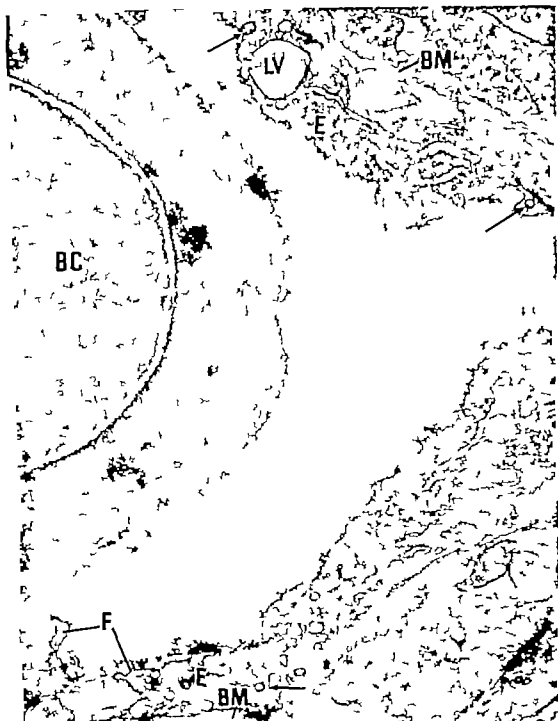


Fig. 4. Electron micrograph of part of blood vessel in the spinal cord of rabbit fetus 14 days after mating. Particles of thorium dioxide, injected intracardially nine minutes before fixation, are adhering to the blood cell (BC) and to the luminal surfaces of the endothelial cell (E). Small vesicles (arrows) in the endothelial cell cytoplasm contain particles of thorium dioxide. A large vesicle (LV) that does not contain thorium dioxide is also present. In the lower left part of the micrograph, flaps (F) appear to be in the process of forming large vesicle. Basement membrane (BM) is discontinuously present. $\times 22,000$.

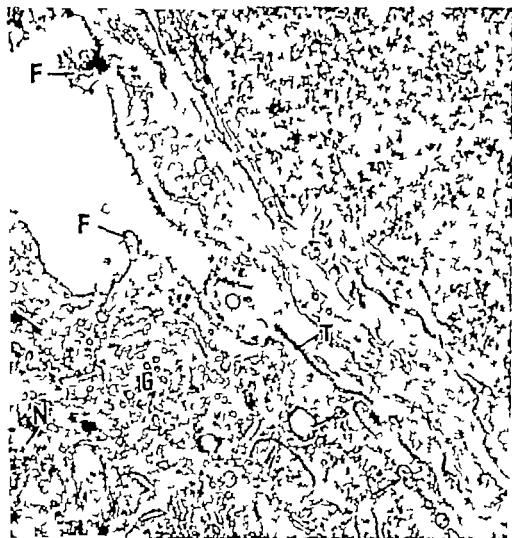


Fig. 5 An oblique section of capillary showing thorium dioxide adherent to the luminal surface of the endothelial cells. Flaps (F) or intraluminal projections to which thorium dioxide particles also adhere are present. A terminal bar is present (T). The flaps associated with this terminal bar appear to be turned in such a way that they are in close approximation to the adjacent cell membrane and adherent particles of thorium dioxide are being impounded. Numerous vesicles containing thorium dioxide particles (arrows) extend for some distance toward the base of the cell beside the terminal bar (T). A large Golgi apparatus (G) is present near the nucleus (N) of this endothelial cell. Thorotrast was injected into the circulation of this 14 day fetus nine minutes before fixation / 25,000

Flaps about to impound thorium dioxide particles are seen in figures 5 and 6. In figure 6 vesicles (V) containing such particles are shown. It is probable that the flaps are always located close to the terminal bars but this relationship may be obscured by the plane of section. In figure 6 particles of thorium dioxide are present in a large vesicle that is being formed by

the flaps adjacent to the terminal bar (T). Many smaller vesicles containing thorium dioxide particles also are present and are seen extending towards the base of the cell in close relationship to the terminal bar.

The presence of functioning flaps projecting into the lumen of blood vessels of fetuses of this period of gestation is not a

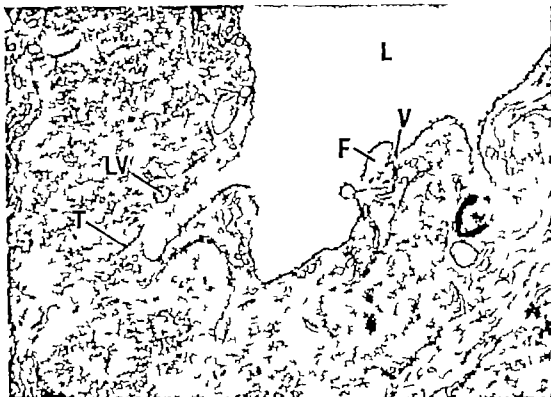


Fig. 6 Electron micrograph of part of blood vessel of rabbit fetus 14 days after mating. Thorium dioxide injected nine minutes before fixation, is present in the lumen (L) adhering to the endothelial cell membrane. Thorium dioxide particles are also seen in large vesicle (LV) adjacent to the terminal bar (T). Small vesicles containing thorium dioxide are present near this terminal bar. A flap (F) projecting into the lumen appears to be about to form large vesicle by coalescing with the endothelial cell membrane. There is a formed vesicle (V) containing thorium dioxide particles in the adjacent cytoplasm. $\times 22,000$.

special condition related to the presence of thorium dioxide in the circulation. Figures 7 and 8 show flaps in the blood vessels of a 1434 day fetus that did not receive Thorotrast. The flaps are coalescing with one another and with the endothelial cell membrane forming large vesicles. Additional vesicles are present in the near by endothelial cell cytoplasm.

DISCUSSION

The presence of another mechanism in addition to the usual process of pinocytosis, for the uptake of materials from the blood stream appears to be related to the state of activity of the tissue. Between the eleventh and twentieth day is a period of rapid growth of the central nervous system of the rabbit fetus. We suggest that the formation of large vesicles by the flaps

reflects activity of the blood vessels commensurate with this rapid growth. Flaps are also found projecting into the lumen of the capillaries of the normal adult central nervous system but they do not appear to form large vesicles by coalescing with the plasma membrane. Flaps or flanges and their function were described by Favcett and Wittenberg ('62) in the counter current system of capillaries of the choroid rete of the fish eye where there is great activity. Kisch ('60) demonstrated in longitudinal sections of capillaries in the left ventricle of the guinea pig heart that these are flaps not villous projections as they appear in transverse sections. In the capillaries of the traumatized sciatic nerve of the rat flaps impounding material and forming large vesicles are seen and the endothelial cell cytoplasm is more volumi-

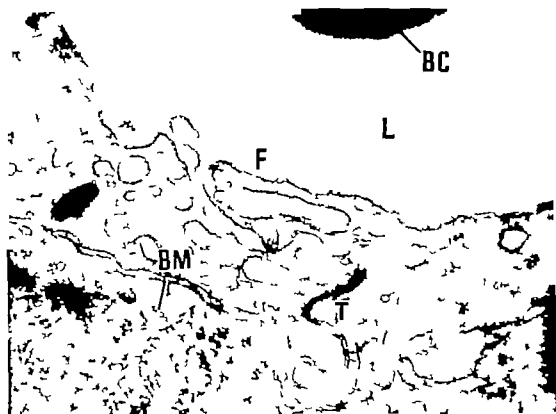


Fig. 7 Part of capillary from the spinal cord of rabbit fetus at fourteen and three-quarter yrs after mating. Thorium dioxide was not injected into this fetus. However the formation of large vesicles by the flaps (F) is shown. The relationship of the terminal bar (T) to the flaps is evident. A basement membrane (BM) is present between the endothelial cell and the neuroectodermal cell. A blood cell (BC) is seen in the lumen (L) of the capillary $\times 44,000$.

ous than in the normal untraumatized nerve capillary (S. Donahue and G. L. Kaye unpublished data). Thus in inflamed tissue where there is known to be increased capillary activity functioning flaps are observed.

The pathway of the membrane-enclosed thorium dioxide particles adjacent to the terminal bar in the endothelium of the rabbit cornea has been described by Kaye and Pappas ('62) *in vivo* and by Kaye et al. *in vitro* (Kaye, Pappas, Donn and Mallett '62). They also described irregularities of the corneal endothelial cell plasma membrane to which numerous thorium dioxide particles adhered and there was pinching off of vesicles containing thorium dioxide from the base of the irregularities. The circumstances of their experiments would allow the suggestion that the marker might have provided an additional stimulus to the activity of the

flaps of the corneal endothelial cells. These experiments demonstrate the impounding of material by flaps forming large vesicles and the transport of material in smaller vesicles adjacent to the terminal bar in corneal endothelial cells.

Kaye et al. ('62) also describes thorium dioxide in the space between corneal endothelial cells and point out that it is not present in the region of the intercellular space where the plasma membrane is thickened to form the terminal bar. We have not observed thorium dioxide in the intercellular space between endothelial cells of blood vessels of the rabbit fetus nor have we seen thorium dioxide particles in the basement membrane. However the time interval in our experiment between injection of Thorotrast and fixation may have been too short (5 to 15 minutes) for these events to have occurred.

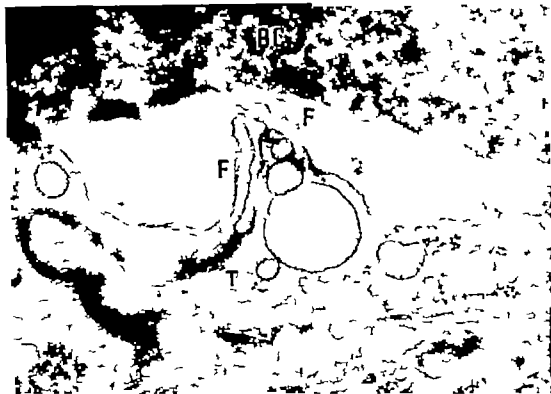


Fig. 8 A blood cell (BC) in the lumen of capillary of rabbit fetus at fourteen and three-quarter days after mating. A long tortuous terminal bar (T) is seen in the usual relationship to the intraluminal projections or flaps (F) which are curving over and coalescing to form large vesicles. N electron opaque material or irritating substance was injected into the circulation of this fetus. $\times 81,000$.

It should, perhaps be emphasized that we do not suggest that the method of uptake described i.e. the impounding of material from the blood stream by flaps or intraluminal projections of endothelial cell cytoplasm replaced the usual pinocytotic mechanism. We believe that the latter is also very active in the blood vessels of the rapidly growing central nervous system of the rabbit fetus

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Complete Dysraphism in 14 Somite Human Embryo

A CONTRIBUTION TO NORMAL AND ABNORMAL MORPHOGENESIS

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ABSTRACT The youngest completely dysraphic human embryo of 2.75 mm G.L. has been reconstructed from the microscopic sections and studied in detail. Although the neural folds failed to close throughout the dorsal extent of this 14 somite embryo, the beginning of independent closure took place rostrally at the torus opticus. The last feature has been shown to be the usual event in normal embryos of this stage. Careful examination of other structures than the nervous system reveals only minor abnormalities. Thus, the dispersion of cells of somites I and II as well as loosening of other sclerotomes in this region has begun prematurely. On the other hand, some retardation in the development of the pharynx, heart and nephros has been noted. Specifically the chords, the mesenchyme, blood vessels and gut have been found to be normal.

The literature pertaining to the closure of the neural folds has been discussed. Also, the reports on experimental inhibition of the formation of the neural tube are discussed with special emphasis on the work of Davis (42). The available evidence refutes the contention that the closure of neural folds is induced by adjacent structures of whatever derivation. It appears plausible as Davis demonstrated in his experiments that certain biochemical reactions within the neural epithelium may be involved in the process of normal closure of the neural folds.

Morphological findings in this present embryo do not support most of the previously advanced theories relating to the pathogenesis of dysraphic states.

Studies of congenital malformation in young human embryos are essential for the understanding of definitive teratological anomalies present in a proportion of newborn infants and in later life. Such studies may also provide important clues for elucidation of normal morphogenesis during embryonic stages. Thus there exists a clear need for accumulation of well documented material concerning aberrations of development. So far only a few early human embryos with total dysraphism have been reported in the literature. The specimen which constitutes the subject of this study is no. 779 of the Collection of the Carnegie Department of Embryology. It is the youngest known totally dysraphic embryo (14 somites). It was utilized in part by Dekaban ('63 in press) in the study of anencephaly however there still remained a number of problems in this unique embryo which require further elucidation. Firstly it is desirable to study the state of development of ectoder-

mal, entodermal and mesodermal structures and their relative position and relationship to the abnormality in closure of the neural folds; this called for more detailed reconstruction of the total embryo. Secondly there is a need for comprehensive evaluation of the available evidence on the closure of the neural folds. Thirdly the literature on experimental prevention of closing of the neural folds requires critical review. With these and other objectives in mind we decided to reinvestigate in greater detail the morphology of this malformed human embryo.

No. 779 completely dysraphic embryo of 14 somites

This was the second pregnancy of a 37 year old white married woman whose first gestation resulted in a normal child. The initial course of the pregnancy was uncomplicated. The last menstrual period

Davis, J. O. 1942. Photochemical spectral analysis of neural tube formation. University of Missouri, Doctor's thesis.

ended on September 3rd and a spontaneous abortion occurred on October 12th.

Gross description The entire specimen, consisting of decidua clot and ovum, was available for examination. The ovum measured $16 \times 14 \times 12$ mm and was entirely covered by villi from 5 to 9 mm long, most of them branching twice and many showing bulbous enlargements (early hydropic degeneration). The chorion was lined by a smooth membrane and filled with a clear fluid. The amnion was intact. The specimen was received examined and most carefully processed at the Carnegie Laboratory of Embryology by H. M. Evans.

The embryo measured 2.5 mm G. L. Its caudal end was bent sharply to the left. Fourteen mesodermic somites were counted on the dorsolateral surface. The nervous system was grossly abnormal for this stage of development. The neural folds were open from forebrain to primitive streak. They were however conspicuously enlarged in the cephalic region as is the case in normal embryos of this stage. The cephalic flexure occurred as in normal embryos at the midbrain level where the neural folds are narrower than at forebrain levels. The prominence of the heart region was well marked. Caudal to the anterior intestinal portal the embryo was spread out on the yolk sac. The region of the forebrain overhung the yolk sac and the inferior end was bent slightly toward the yolk sac.

The embryo was embedded in paraffin. It was cut serially at 15μ transverse to the rostral end and stained with hematoxylin and orange G. A complete set of photomicrographs was prepared by O. Heard at a magnification of 133 diameters. They were projected on bromide paper and on the basis of a preliminary wax model the photographs were oriented by the use of perpendicular guidelines according to the method developed by Lewis (15). Using these bromide prints Mr. Heard constructed a model of the embryo (fig. 1). Both the bromide prints and the model proved helpful in interpreting the microscopic sections and the prints were also used for the preparation of our reconstruction (fig. 2).

Description of the model. It is evident from the photograph of the model (fig. 1A) that the neural folds failed to fuse throughout most of the neuraxis. The cephalic flexure is about 90° and the cerebral end appears slightly smaller than that of the comparable 14 somite specimen of Heuser (30). To what extent this is due to the more extensive post mortem changes is impossible to say. A significant finding is an incipient closure of the cephalic folds that extends dorsally from the torus opticus. This aspect will be discussed later in more detail. The optic and otic vesicles had formed in the usual locations. Similarly cranial neural crests are present. The caudal 35% of the neuraxis had been rotated to the left, possibly post mortem, and as a result of this the plane of section was oblique to the long axis of the embryo caudally (figs. 1A and 10).

Description of the reconstruction. A careful midsagittal projection reconstruction of the cephalic 65% of the specimen was prepared whereas the caudal 35% were reconstructed in the horizontal plane. The transition of these two planes is indicated by a line marked by an asterisk in the projection reconstruction (fig. 2). Complete reconstruction of chords, gut, heart, as well as part of the ectoderm, permitted study of the relationship between these structures and the neural folds. Because of the considerable amount of morphological detail the description of various systems will be dealt with separately.

Nervous system. The outstanding feature of this embryo is the neural groove which is wide open in the region where the neural tube is normally closed at this stage of development. In the region of the midbrain and the adjoining hindbrain the neural folds resemble those of 3 to 4 somite embryos. Caudally they gradually flatten out into a plate depressed in the midline as in presomite stages (figs. 6 to 9). It is significant for the understanding of anencephalic monsters with normal eyes that in this embryo closure of the folds had begun from the medial cephalic end of the neuraxis. An incipient neural tube had formed over the rostral one-third of the optic vesicles (fig. 1 B and C, figs. 2 and 3). The optic vesicles are relatively

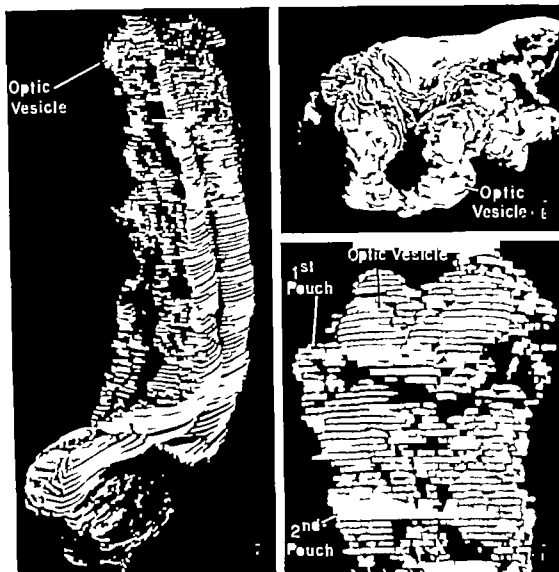


Fig. 1A, B and C Photographs of the original plaster model dissected to show the nervous system and the gut. Figure 1A presents the entire model viewed from the left. Note the nervous system with its trough like neural groove. The caudal end of the embryo is bent to the left. Figure 1B is head-on view of the rostral end of the model. Below are the optic vesicles where the neural tube has closed (see p. 25). The caudal forebrain and midbrain are wide open. Figure 1C shows the optic vesicles with the median seam of closure. Below is the ventral surface of the pharynx showing the first and second visceral pouches. They stand out clearly on the observer's left.

smaller than in the 14-somite Heuser embryo and since they comprise the bulk of the forebrain as is normally the case it would seem that the forebrain was smaller than would be expected at this stage. Two expansions of the neural folds in the region of the cranial flexure mark

the midbrain as in the 13- and 16-somite embryos of figures 16 and 17 in Bartelmez and Evans ('26). In 779 the adjoining segment is indicated by a depressed basal plate and by the attachment of the trigeminal neural crest (fig. 2). As later stages show this segment gives rise to

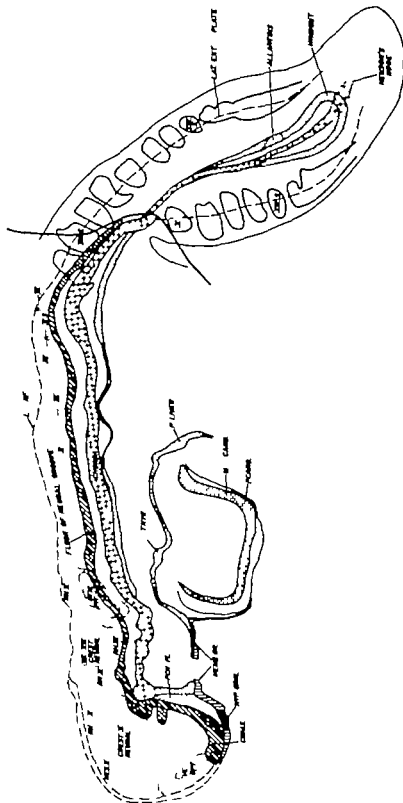


Fig. 3. Mid-sagittal projection reconstruction of the superior 65% of the dysraphic embryo. The inferior 35% is reconstructed in the horizontal plane that is parallel to the dorsal surf ca. line marks junction of the reconstructions.

Abbreviations

P CHIAS., Primordium chiasmatis
 VES. OPT. Vesicula optica
 MES. II. Mesencephalon II.
 HYP. ORAL., Hypophysis orali
 MEMBR. OR., Membran orali
 RH., Rhombomeres
 PCTIL. PL., Prechordal plate

IS., IIS., Somites I, II
 LAT. EXT. N. PLATE, Lateral extent of
 the neural plate indicating depth of groove
 P THYR., Primordium of the thyroid
 P LIVER, Primordium of the liver
 M E. CARD. Myo-epicardium
 P CARD. Pericard m

rhombomeres I and II (Bartelmez and Dekaban, '62). A slight elevation of the neural folds indicates rhombomere III which is normally differentiating at this period. As in all embryos of the somite period, rhombomere IV is distinctive in form the VII-VIII neural crest to which it had given rise lies on its lateral surface. At this level the neural groove has narrowed, and the characteristic thickenings of the neural folds and depression of the floor are present (figs. 2 and 4 pl. 2). A normal otic pit is lateral to rhombomeres IV and V. Rhombomere V is indicated by an elevation of the neural folds and by the proliferation of neural crest from their lateral edges which are typically loose in structure. This crest extends toward the feebly developed second branchial pouch and represents that which later contributes to the glossopharyngeal ganglia.

Caudal to this level there are groups of neural crest cells attached here and there to the neural plate. This occipital and upper cervical crest agrees in extent with that figured by Heuser ('30 fig. 4). In 779 the neural crest cells are somewhat more abundant at the level of somites II and V.

As the neural plate is followed caudally it becomes flatter (figs. 2 and 9) although the median groove extends caudally almost to Hensen's node. In figure 2 the lateral edge of the neural plate is indicated by a broken line. In this embryo the space between the chorda and the floor of the nervous system is empty and is materially greater than in Heuser's specimen. In earlier well preserved embryos it is absent. In later stages fixed *in vivo* it is occupied by a loose mesenchyme with few cells. It would seem then that the space in the intermediate stages is due to the post mortem shrinkage of the adjacent mesenchyme which presumably has a higher water content than the rest. Since in 779 the thickness of the neural epithelium is fairly uniform where there is underlying mesenchyme and where as at the rostral end the nervous system is in contact with ectoderm, it would appear that the space is due primarily to a differential shrinkage of mesenchyme and not of the neural epithelium.

The space between the primordium of the oral hypophysis and the forebrain is also an artifact. In the Heuser embryo there is a loose fold of the surface ectoderm in this region. The hypophyseal primordium is a thickening of the surface epithelium marked off by lateral sulci and distinguished by cells larger than those of the adjoining ectoderm and by cytoplasm that has remained unstained.

Synopsis. Complete dysraphism involving the entire neuraxis except at the rostral extremity where normal closure had occurred. Slight hypoplasia of the cephalic neural folds is present.

Chorda. The chorda is normal in form and structure. Where the axis of the embryo is twisted to the left the chorda is somewhat distorted (fig. 2). At the level of somite X in figure 2 the reconstruction on the midsagittal plane joins that on the horizontal plane. In the former the dorsoventral diameter of the chorda is plotted. Its transverse diameter is plotted in the horizontal projection. The failure of the cytoplasm of the chordal cells to stain serves to differentiate them; they tend to be radially arranged. In the rostral one-third of the pharynx the chorda is still incorporated in the pharyngeal wall so that in the midline it forms the roof of the pharynx (figs. 2 and 4). The typical stages in its separation from the pharyngeal wall are present in the rostral levels of the first pouch (fig. 5). As far as the anterior intestinal portal, chorda and entoderm remain in contact; caudal to this they are more or less separated. In the region of the hindgut they are again in intimate contact, beyond this the chorda merges into the diffuse mass of cells which constitutes Hensen's node. It would appear that the development of the chorda was in most respects normal for this stage of development.

Somites. Caudal to the level of the second pharyngeal pouch there are irregular groups of mesodermal cells which we interpret as the dissociating first somite. They are separated from a somewhat more compact group by a dorsal aortic ramus. At the caudal end of this group there is a mass of radially arranged cells resembling a myotome. This entire group is the dissociating second somite. There is an aortic

ramus between it and the well differentiated somite III. Here dermatome myotome and sclerotome with a myocoel are present. The sclerotome had spread out caudally and is abnormally loose in structure as in somite II (fig. 8). Somite IV is similar in structure but lacks a myocoel. At this level the shift in the embryonic axis begins (fig. 9). Somite V is distorted on the embryo's left and has the peculiar large loose sclerotome; somites VI to XIV are normal in structure. As in the 14-somite embryo of Heuser somites XV and XVI are differentiating but are not yet separated from the segmental plate.

Synopsis. In general the cell population of the individual somites may be decreased. The dispersion of the cells of somites I and II had begun prematurely as had the loosening of the sclerotomes of somites III to V. The abnormal conditions in the prospective occipital and upper cervical levels are significant in view of certain anomalies especially the typical lordosis of these regions in intencephalus and anencephalus.

Intermediate cell mass and nephric primordia. Between somites I to IV and the coelomic mesothelium the mesenchyma is very loose. From the level of somite III to somite IX there are groups of 4 to 6 small cells closely applied to the surface ectoderm in this region. Occasionally they are radially arranged. The groups cannot be recognized in every section so they indicate a Wolffian duct regressing in the upper levels. In the VII-VIII intersomitic space there is a small vesicle in contact with the mesothelium. At the level of the next two somites a larger nephric vesicle opens into the coelom (fig. 9). The surface elevation corresponding to it resembles the nephric ridge first recognized in man by Wen ('28). The nephric primordia are retarded compared to this system in Heuser's specimen.

Synopsis. Some retardation in the development of the nephros. The entire mesenchyme appears normal except for post mortem shrinkage. This is significant as it confirms the conclusion of Boerema ('29) and Davis ('42) that mesenchyme is not involved in the failure of the neural folds to close.

Vascular system. The pericardial cavity is almost filled by the myoepericardial mantle (figs. 2, 6 and 7).

The heart is simple in form similar to that of embryos of horizon X as described by deVries and Saunders ('62). The median axis of the myoepericardium is straight caudally where the broad mesocardium narrows it divides into right and left atria. The endocardium divides to form the first pair of aortic arches which loop around the first pharyngeal pouch. On the right, the arch and dorsal aorta are greatly dilated. On this side the second arch is forming.

A series of intersegmental rami arise from each dorsal aorta between the levels of somites I-II as far as somites XI-XII. There are lateral aortic rami in the region of somites VII to IX here the nephric primordia were developing. In the region of somites VII to X intestinal rami reach the wall of the gut that has not yet separated from the yolk sac.

The primary cephalic vein extends forward to the region of the optic vesicle, giving off rami to the regions of the trigeminal and the acustico-facial neural crest. Like the dorsal aortae the cephalic vein has alternately dilated and constricted regions. A series of interrupted vascular primordia corresponding in position to the cephalic vein can be recognized as far caudally as somite X.

Synopsis. No gross abnormality of the vascular system is present. Compared with the 14 somite embryo of Heuser the heart is somewhat retarded in development.

Gut. At the rostral end of the pharynx the cells are loosely arranged this can be identified as the prechordal plate (fig. 2). There is an opening in the oral membrane such as does not appear normally until horizon XII. The normal appearance of the cells at the rounded margins of the opening suggest that this condition is premature rather than the result of post mortem maceration. On the other hand the differentiation of the pharyngeal pouches is retarded. On the embryo's right there is a small area of contact of the first pouch with the surface ectoderm the minute branchial membrane is depressed. On the left the components of this mem-

brane seem to have been separated by shrinkage. The lateral invaginations into this pouch (fig. 5) agree with those which appear in all early human embryos. Grosser ('10) who first described them suggested that they might represent vestiges of internal gills. There is no evidence to support this. The position of the thyroid primordium caudal to the first pouch is normal for this stage (fig. 2). The second pouch is only indicated whereas in the 13-somite embryo of Wallin ('13) and the 14-somite Heuser embryo it had established contact with the ectoderm; in the latter a third pouch had appeared. In 779 as in the Heuser embryo the primordium of the liver is present. The gut is open from the level of somites II to VII. The relations of the hindgut to chorda and allantois are typical and there is an anal plate. The allantoic duct is small and extends for 0.12 mm into the belly stalk. The intra-embryonic coelom extends from the heart to the beginning of the segmental plate and is lined by typical tall mesothelium. Between the levels of somites II and X it communicates with the extraembryonic coelom.

Synopsis The pharynx is retarded but there is no malformation of the gut.

DISCUSSION

The investigation of morphology and structural relationship of definitive human monsters must, of necessity be based on (A) a detailed knowledge of normal development (B) evidence derived from experimental studies and (C) detailed studies of early stages of malformed human embryos. This last aspect is particularly important for the evaluation of dysraphic states which are by far the most frequent malformations of the nervous system.

A. Since the underlying abnormality in dysraphism is nonclosure of neural folds it is necessary to consider the formation of late stages of the neural plate and the morphological changes associated with rising of neural folds and their closure into neural tube. One of the earliest differentiations in vertebrate embryos is thickening of the ectoderm which will give rise to the neural elements of the entire central and peripheral nervous systems. At this stage the neural ectoderm consists of a

simple epithelium of columnar cells. These cells differ in shape because the relatively large nuclei lie at different levels. It is obvious from the inspection of a series of models and reconstructions (see Bartelmez and Dekaban, '62) that the general region of the brain is the first to appear. This has also been demonstrated experimentally in various species of animals. In the well known embryo "Gle of Spee the neural folds have begun to arise. It is significant that they occupy the entire dorsal surface of the rostral extremity of the embryo. The presence of taller epithelium in the rostral region of the neuraxis is shown in the drawings of embryo "Gle (H. M. Evans in Keibel and Mall Vol. 2 '10 figs. 404 and 405). By the time two mesodermic somites have appeared in human embryos it is possible to identify forebrain, midbrain and three hindbrain segments in the wide open neural folds (Ingall's embryo Bartelmez, '23 fig. 1). Only three human embryos are known which are sufficiently well preserved to give reliable evidences as to the level at which the neural folds begin to close. These embryos are (1) the 6-somite Huber embryo the folds of which are closed at the level of the second and third somites (Arey '38) (2) the 7-somite Schochet embryo (Heuser and Corner '57) which shows closure of the neural tube at the level of somites 3 to 5 and (3) the 7-somite embryo described by Payne ('25) which shows closure from somites 3 to 7. Arey ('38) and subsequently Sensenig ('57) demonstrated that no somites are differentiated rostral to the one which appeared first. In addition, Sensenig confirmed the finding that the first four somites contribute to the formation of the occipital region. From these data it would appear that closure of folds begins in the transitional region between future medulla oblongata and spinal cord. Closure progresses rapidly in both directions so that in the eight-somite embryo described by Bartelmez and Evans ('28 fig. 12) it extends from the level of the caudal end of somite 7 to the otic plate. In the ten-somite embryo of Corner ('29) the closure had progressed slightly beyond the last somite but rostrally it had reached only to the level of the otic plate. This specimen

ramus between it and the well differentiated somite III. Here dermatome myotome and sclerotome with a myocoel are present. The sclerotome had spread out caudally and is abnormally loose in structure as in somite II (fig. 8). Somite IV is similar in structure but lacks a myocoel. At this level the shift in the embryonic axis begins (fig. 9). Somite V is distorted on the embryo's left and has the peculiar large loose sclerotome somites VI to XIV are normal in structure. As in the 14-somite embryo of Heuser somites XV and XVI are differentiating but are not yet separated from the segmental plate.

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The following data are condensed from his table 2. After irradiating 17 embryos ranging from late presomite to six-somite stages for 12.5 seconds, he incubated them for 30 hours. In three of these the entire central nervous system was an open plate, in nine it was open for from one-fourth to three-fourths of its length and in five it was closed as far as in the control embryos.

Irradiation for 15 seconds and incubation for 30 hours resulted in 15 of the 17 embryos with open neural folds for one-fifth to three-fourths of the length of the nervous system the folds had closed normally in only two.

When a group like the first was incubated for 54 hours the nervous system was open for one-fourth to one-third of its length in only five, whereas in 12 it had closed. This demonstrated that the irradiation for 12.5 seconds had not seriously injured the majority of the embryos and the inhibition was reversible.

Incubation for 54 hours after 15 seconds irradiation resulted in one monster with completely open neural plate, 12 with the neural folds open for one-sixth to one-half their length; in the remaining twelve the tube had closed. Such experiments provide evidence of individual variability in susceptibility.

The chorda in normal early chicks is closely applied to the neural epithelium; these two structures are separated in embryos in which folding has been inhibited by irradiation (fig. 1 Davis, 42). The chorda is apt to be abnormally small although the cells appear normal. In addition, the mesenchyme underlying the nervous system is usually oedematous with pyknotic cells. By explanting normal neural plates freed of chorda and mesenchyme Davis showed that folding and tube closure proceeded normally. This had also been demonstrated for *Amblystoma* by Boerema (29). On the other hand, irradiated neural plates removed and explanted, failed to close over much of their extent.

These experiments showed that a substance or substances involved in folding were inactivated by irradiation. In 44 Davis presented striking evidence that

a compound, probably related to vitamin D within the plate is responsible for the folding that forms the neural tube. His experiments have no bearing on the problem of the nature of the substance responsible for the original induction of the neural plate. In this connection he points out that experiments in which foreign substances are introduced into living embryos to induce a neural plate in indifferent ectoderm, are necessarily inconclusive since it is not possible to determine the part played by changes induced in the surrounding tissues by the experimental procedures.

Most of the experimental work on the influence of deleterious factors on early embryonic development has been done on the eggs of lower vertebrates since their environment can be readily modified and the changes produced can be readily followed *in vivo*. In many adequate control experiments have not been made.

There appears to be no more extensive and careful study than that of Bellamy (19) as to the periods in development at which growth and differentiation are inhibited by noxious factors of the environment. With an abundant supply of frogs eggs normally fertilized in an aquarium kept between 5 and 9 C he could run a series of experiments on the spawn of each pair of clasping frogs. The eggs were left within their protective envelopes of jelly. Low temperature in the dark and nine chemical agents were used in a series of experiments run side by side with controls. The effects of the various agents were fundamentally similar.

It is significant that all interferences with development which were begun shortly after fertilization ended in death prior to hatching, but in many such experiments a series of strikingly abnormal blastulae and gastrulae were produced; all of them showed that growth and/or differentiation had been inhibited. In one experiment two-celled eggs were exposed for 24 hours to KCN M/1000 and then transferred to KCN M/5000. During the ensuing day they developed into obviously retarded blastulae (see Bellamy's figs 7, 10 and 11). At this time areas of plasmolysis of pigment appeared in the regions

is unique however in that the surface ectoderm overlies the lateral extremity of the neural folds as far forward as the midbrain. A similar condition appeared in the 17-somite embryo of Wen ('28) in which the surface ectoderm had already closed over the minute anterior neuropore. In several other 17-19-somite embryos that have been described the neuropore is still open and although it varies in extent, it is at the level of the optic vesicle in every instance (Streeter '42). The closure is complete in the 20-somite C. L. Davis embryo ('23) here the site of the final closure is marked by a small area where no boundary between superficial and neural ectoderm can be recognized. This site is still clearly seen in the 22-23 somite and 25 somite embryos of Bartelmez and Blount ('54) as well as in the 25 and 28 somite embryos of Sternberg ('29). It is obvious then, that there is considerable variability in the closure of the anterior neuropore. This is due partly to a process which has been generally overlooked, namely the union of the neural folds which proceeds from the original rostral end of

neural plate toward the closure that is advancing at the same time rostrally from the midbrain. This independent rostral closure was first noted by Johnston ('09) in lower vertebrates. The evidence for this in man is as follows: all embryos of Streeter's horizon X have a terminal notch. This owes its origin to the bending of the nervous system around the end of the pharynx so that laterally the neural folds extend beyond the rostral end of the neuraxis in the midline (Bartelmez and Evans, '26 figs. 9-14, 18 and 19; Heuser and Corner '57 fig. 1). In the 13-somite embryo of Wallin ('13 fig. 2) and 12-somite embryo "Legge, the notch is disappearing in the 14-somite embryo of Heuser ('30 fig. 10) it is gone. The two lateral primordia of the optic vesicles meet at the rostral end of the nervous system this can be seen in the eight-somite embryo of Bartelmez and Evans ('26 figs. 12 and 19) and the ten-somite Corner embryo ('29 figs. 1 and 11). Mall ('17) recognized that this marks the site of the optic chiasma and adopted the term "torus opticus" which was first used by Frodip in '06. As the forebrain elongates it grows around

the end of the pharynx so that in sections it appears to be ventral to the midbrain. The torus opticus however remains terminal in position. In the 14-somite Heuser embryo ('30 figs. 4 and 10) the torus appears elongated. As the subsequent stages show this apparent elongation is due to the fusion of the lateral moieties of the terminal notch (see Bartelmez and Dekaban, '62, figs. 64, 67, 68). The fused region is accordingly dorsal to the *primordium chiasmatis*. Obviously the closure of the folds is now proceeding from the torus toward the closure that is extending forward from the midbrain. As might be expected, the location of the point of the meeting of the two seams of closure varies. Consequently neither the anterior neuropore nor its site of closure can be used as a landmark to indicate the original rostral end of the nervous system. The primordium of the chiasma remains the original terminal end. The seam of closure of the lateral folds gives rise to the lamina terminalis and in part to the tela chorioides ventriculi III. The closure of the posterior neuropore occurs in the more advanced embryos of Streeter's horizon XII which have 27 to 29 somites and are about 4 mm long. They belong to the end of the fourth week of gestation.

B. Many experimental procedures have been used to interfere with the development of various vertebrate embryos. A variety of abnormalities including dysraphism ranging from spina bifida to anencephalus amyelus associated with other defects have been produced, (Stockard, '10; Stockard and Craig, '12). Thus far however we have been able to find only one study in which the formation of the neural tube was specifically inhibited. This was reported by J. O. Davis ('42 and '44). He also produced significant evidence as to the substance or substances which may be involved in the process of normal closure of the neural folds. Since most of his material is contained in his unpublished thesis we will discuss his findings at greater length. Using monochromatic ultraviolet light ranging from 2,483 Å to 2,894 Å, Davis irradiated chick embryos in early neural fold stages through an opening in the shell; subsequently he sealed the eggs and returned them to the incubator.

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PLATE 1

EXPLANATION OF FIGURES

- 3 Section 1-8-2 passing through the optic vesicle, magnified $\times 178$.
- 7 Section 1-5-13 passing through the first orotic arch magnified $\times 178$

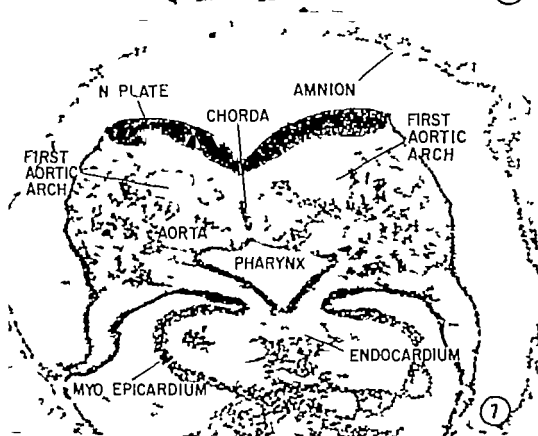
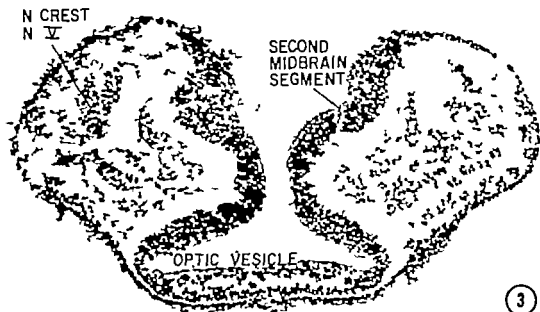
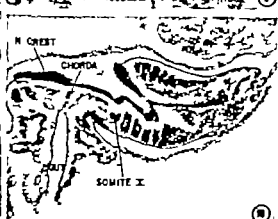
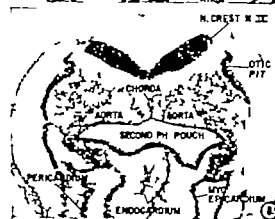
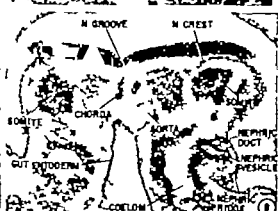
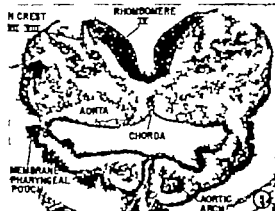
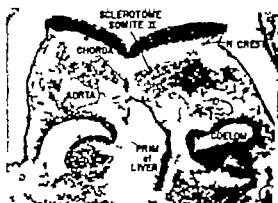
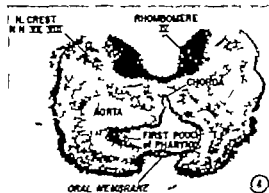


PLATE 2

EXPLANATION OF FIGURES

- 4 Section 1-3-7 passing through the neural crest of cranial nerves VII-VIII, magnified $\times 75$.
- 5 Section 1-3-12 passing through rhombomere IV magnified $\times 75$.
- 6 Section 1-4-8 passing through the otic pit, magnified $\times 75$.
- 8 Section 2-1-11 passing through the second somite, magnified $\times 75$.
- 9 Section 2-2-16 passing through the fifth somite magnified $\times 75$.
- 10 Section 2-3-12 cut obliquely through the somites 10-14 magnified $\times 51$.



A Histologic Description of Certain Epithelial and Vascular Structures in the Kidney of the Normal Rat¹

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ABSTRACT The cytology of the whole length of the collecting tubule of the rat kidney was studied by light microscopy. The tubule may be subdivided into four successive segments on the basis of the types of epithelial cells that form its lining. The morphology of other epithelial and vascular structures in the renal medulla and papilla was also studied. In fixed histologic specimens, morphologic characteristics of capillaries near the apex of the papilla and in vasa recta of the outer portion of the medulla suggest that their plasma is relatively concentrated in the living rat. First, plasma in capillaries of both regions stains deeply with certain histologic dyes. Second, in many specimens erythrocytes in capillaries near the apex of the papilla appear crenated. The significance of the morphologic findings is discussed with regard to current hypotheses concerning the physiologic function of the collecting tubule and other epithelial and vascular structures in the medulla and papilla.

It is interesting to note that morphologists have not in the past scrutinized the renal medulla and papilla as intensively as they have the cortex. Recently physiologists have gathered data revealing the significant role the papilla plays in forming concentrated urine (see review by Ullrich et al. '62). Such studies provide impetus for more thorough morphologic examination of this critical area, and this study reports observations obtained by light microscopy of certain of its epithelial and vascular components.

From its origin in the cortex at the termination of the distal convoluted tubule the collecting tubule passes successively through the cortex, the outer and inner zones of the medulla, and the papilla. Upon reaching the apex of the papilla it empties into the pelvis of the ureter and at this point, its lining epithelium becomes continuous with that coating the outer surface of the papilla. Descriptions of the structure of the collecting tubule along its length by both light and electron microscopy are found in a relatively small number of reviews and original articles. Sjöstrand (44) traced the historical evolution of our knowledge of the histology of the collecting tubule, and his monograph on the kidney should be referred to for detailed information concerning the earlier

literature on this subject. More recently Rhodin (58a; '58b) appended newer findings from electron microscopy. However his description covers only the cortical portion of the tubule which he subdivides into two segments: an initial connecting part followed by the arched portion of the collecting tubule.

Sjöstrand (44) noted in the mouse kidney that the transition from distal tubule to connecting part of the collecting tubule takes place relatively abruptly. At the junction, the arrangement of mitochondria in a basal pallade characteristic of cells of the convoluted segment of the distal tubule terminates and the mitochondria of subsequent segments of the uriniferous tubule are more randomly scattered in the cytoplasm of the lining cells. Many authors have reported that two types of cells may be identified in the epithelium of the collecting tubule (see Sjöstrand, 44; von Möllendorf '30). The ordinary lining cells, which are numerically preponderant and are often referred to as "light cells," are broad cells of cuboidal height. In the light microscope their cytoplasm appears relatively homogeneous and contains few

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Summary Research Fellow of the United States Public Health Service.

granules vacuoles and mitochondria. The latter are located mostly in the base of the cell. The second type of cell referred to as "dark" or "intercalated" cells is slightly broader and taller than ordinary lining cells. It occurs singly and contains abundant cytoplasmic granules. The granules have been unequivocally identified as mitochondria on the basis of their fine structure (Rhodin '58a, '58b). The less numerous intercalated cells occur with greatest frequency in some of the cortical segments of the collecting tubule and are absent from its terminal segments. (See Observations.)

The capillaries of the renal medulla and papilla receive arterial blood predominantly from efferent glomerular arteries arising from juxtamedullary glomeruli (von Møllendorff '30 Trueta et al. '47 Ljungqvist and Lagergren, '62). The capillaries form long branching loops, the vasa recta, which follow the same straight course towards and away from the apex of the papilla as do Henle's loops. Mammalian kidneys maintain an increasing osmotic gradient from the cortical border of the medulla to the apices of the renal papillae (Wirz et al. '51 Bray '60). The cortex is isosmotic with the plasma of the general circulation, whereas the osmolarity at the apex of the papilla can be several times as great. The vasa recta maintain an active circulation to the medulla and papilla without disturbing the gradient. To do this effectively the vasa recta must act as a countercurrent diffusion exchange apparatus. Their walls must be permeable to small molecules in order to allow water to be shunted from the descending to the ascending limbs of their capillary loops. Thus far several morphologic and physiologic studies have substantiated by indirect evidence that the vasa recta are indeed readily permeable to water. For example several workers have shown that fluid in collecting tubules, Henle's loops, and vasa recta at the apex of the papilla have roughly the same osmolarity (Wirz, '53 Gottschalk and Mylle '59 Ullrich et al. '61a). Longley and Burstone ('58) reported that blood plasma within capillaries of the renal papilla appears denser than elsewhere. Similarly protein-bound dyes circulating through the

vasa recta display an increasing concentration gradient towards the apex of the papilla (Longley et al., '58). Furthermore, after being injected intravenously larger solutes reach the apex of the papilla much more rapidly than do smaller solutes injected simultaneously (Longley et al., '58 White et al. '60 Maganzini and Lillienfeld, '61 Lassen and Longley '61).

Apparently in order to ensure the efficient shunting of substances from descending to ascending limbs the vasa recta form a series of *retia mirabilia* as they pass through the outer portion of the renal medulla (Longley et al. '60). These consist solely of bundles of intermingled ascending and descending limbs of the capillary loops. The two may be readily distinguished from each other in sections examined by electron microscopy because the descending limbs are lined by a continuous endothelium similar to that of muscle capillaries whereas the endothelium of the ascending limb is fenestrated and resembles peritubular capillaries of the renal cortex (Longley et al., '60). Classification of individual branches by light microscopy is more difficult to carry out.

The current report describes the histologic structure of the collecting tubule in the rat kidney from its origin in the cortex at the termination of the distal tubule to the point where it empties into the pelvis of the ureter at the apex of the renal papilla. In addition this report draws attention to morphologic characteristics of the vasa recta of the renal medulla and papilla which seem to be related to their role as a countercurrent diffusion exchange apparatus in the urine-concentrating mechanism.

MATERIALS AND METHODS

Kidney specimens were obtained from 25 normal male and female rats of the Long Evans strain which had been receiving food and water *ad libitum*. They were kept in metabolic cages for several days prior to autopsy in order to record their output of urine. Only those rats excreting a normal daily volume (1.8-6.5 ml/100 g body weight/day average 3.7 ml/100 g body weight/day) were used in this study. At autopsy the rats were anesthetized with

nembutal, and their kidneys were exposed through a midventral abdominal incision. Usually only the left kidney but occasionally the right one as well, was fixed either *in situ* by pouring fixative over the kidney with its circulation intact, or by first removing it from the rat after clamping the renal artery vein and ureter and then cutting it into small blocks under fixative. A variety of techniques was used for preparing specimens for histologic examination. They were fixed either in glutaraldehyde (Sabatini et al., '63) acrolein (Luft, '59) or formaldehyde embedded in paraffin, celloidin, or polyester wax (Sidman et al., '61); and stained with a modification of Mallory's Azan procedure (Lillie '54). The most adequate preservation was achieved when the kidney was immersed initially *in situ* in acrolein fixative for 5-10 minutes. The kidney was then removed from the rat, and a segment containing the papilla and the portion of cortex to which it was attached was cut out for further fixation and subsequent embedding. Polyester wax was used most frequently for embedding as it facilitated cutting sections less than 5 μ thick. During sectioning the specimens were oriented so that sections contained parenchyma stretching from peripheral cortex to apex of the papilla. A Zeiss photomicroscope equipped with a plate camera attachment was used for photomicrography.

OBSERVATIONS

Topography of the rat kidney

For ease of description, the rat's unilobar kidney may be subdivided into five zones (fig. 1). Zone I comprises the cortex, and its principal parenchymal constituents are renal corpuscles and proximal, distal, and collecting tubules. The medulla is usually divided into outer and inner zones, the former being further subdivided into an outer and inner band. Zone II the outer band of the outer zone of the medulla, contains the straight portions of proximal tubules, ascending portions of distal tubules, and collecting tubules. Zone III the inner band, contains thin (descending) limbs of Henle's loops, collecting tubules, and ascending portions of the distal tubules. The ascending limbs of the distal tubules that traverse Zones II and III are

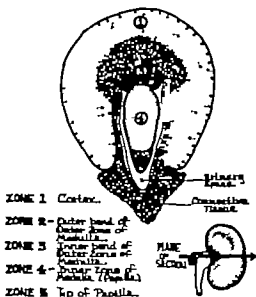


Fig. 1 Schematic view of rat kidney sectioned transversely at the level of the hilum. The approximate location and extent of the five zones into which the kidney is subdivided for the purposes of this study is illustrated.

often termed thick limbs of Henle's loops. However under examination by light microscopy in this study this segment of the nephron of the rat appears morphologically identical with segments of the distal tubule located in the cortex (Zone I). At this stage it seems more reasonable, therefore, to refer to it as a part of the distal tubule rather than as part of Henle's loop. More than 30 years ago van Møllendorp ('30) also noted the close resemblance in some species between the thick, ascending limb of Henle's loop and the distal tubule. He proposed a classification for kidney tubules in which the thick, ascending limb of Henle's loop and the distal tubule were considered subdivisions of a single unit within the nephron, the *Mittelstück*. The thick, ascending limb of Henle's loop constituted the straight portion of the *Mittelstück*, and the distal tubule including the macula densa constituted its convoluted portion.

The remaining portion of the kidney comprised principally of the papilla, is

Nembutal is the registered trade mark of sodium pentobarbital produced by Abbott Laboratories, North Chicago, Illinois.

usually classified as a single zone, the inner zone of the medulla. It contains collecting tubules as well as ascending and descending limbs of Henle's loops. Since as we shall point out later the apical portion of the papilla has several unique histologic properties which can best be dealt with separately we have subdivided the papilla into two parts: the basal two-thirds (Zone IV) and the apical third (Zone V). In Zones IV and V the two limbs of Henle's loop are indistinguishable from one another and may be classified as thin limbs. In Zone V collecting tubules approach the apex of the papilla where they empty into the pelvis of the ureter and the descending limbs of the lengthiest Henle's loops upon reaching the nadir of their descent, make a U-turn and ascend back to the cortex. The large collecting tubules in this zone are often called papillary ducts.

Collecting tubule

After the techniques of fixation and staining described in Materials and Methods are applied to kidney specimens it is possible to demonstrate that the cytologic characteristics of the epithelial cells lining the collecting tubule change markedly along its length. For example the mitochondria of the lining cells in different zones vary in number and orientation and can serve as useful criteria for distinguishing individual cell types. On the basis of the types of cells forming the population of lining cells along its length the collecting tubule may be divided into four segments. The first segment corresponds to the connecting piece noted in earlier studies. Since it is usually found only after prolonged searching, we assume it to be of short length. It appears to arise by gradual transformation of the epithelium of the terminal portion of the distal tubule. Its cells are of roughly the same height and width as those of the latter. On the basis of cytological properties two classes of cells may be identified in the epithelial lining: transitional cells and ordinary lining cells. Transitional cells are usually scattered singly or in small groups in the lining epithelium (figs. 3 and 4). They are similar to ordinary lining cells except for one feature: mitochondria tend to be arranged perpendicular to the basal sur-

face of the cell in a manner reminiscent of the basal palisade they form in cells of the distal tubule (fig. 2). Since the number of mitochondria with this orientation is usually fewer than in cells of the distal tubule this type is considered to represent a transitional stage between lining cells of the latter and ordinary lining cells of the collecting tubule. Ordinary lining cells contain a moderate number of thin filamentous mitochondria scattered throughout their cytoplasm without sign of preferred orientation (figs. 3 and 4). (A third, distinctive type of cell, the intercalated cell, may occasionally appear in the initial segment but it does not usually occur in significant numbers in the lining epithelium before the second segment.) All of the cells of the segment are taller centrally where their nuclei are situated than in the region of their lateral border. The matrix of the round nuclei of both transitional and ordinary lining cells is of homogeneous texture. The abrupt transition from distal tubule to initial segment of the collecting tubule (i.e., the connecting piece) observed by Sjöstrand (44) in the mouse apparently does not occur in the rat.

The lengthy second segment of the collecting tubule begins in the cortex (Zone I) and traverses Zones II and III to terminate in the outer portion of Zone IV. Two types of epithelial cells can be identified in its epithelial lining (figs. 5-8): ordinary lining cells like those of the first segment as well as scattered intercalated cells. Intercalated cells are interspersed singly among the other epithelial cells and are generally taller and broader. Their cytoplasm is distinctive for its rich content of relatively deeply staining mitochondria shaped like short rods or spheres. Their round nuclei are generally larger than those of ordinary lining cells and contain clumps of chromatin in their matrix. As the second segment nears Zone IV its epithelium becomes progressively lower in height. At its termination just within this zone, intercalated cells disappear from the epithelial lining.

The third segment of the collecting tubule, another lengthy segment, extends throughout the remainder of Zone IV. It is lined by a single type of cuboidal epithel-

lial cell, broad in width and of low height, which appears devoid of cytoplasmic organelles other than a few scattered mitochondria (fig. 9).

The fourth segment the papillary duct evolves gradually from its predecessor by progressive heightening of the epithelial lining until it reaches low or medium columnar. Only a single type of epithelial cell is present (fig. 10). Its apical surface is smooth and its cytoplasm appears relatively devoid of organelles except for a small number of thin, filamentous mitochondria. The borders between adjacent cells are especially prominent in this segment. When examined under high resolution with the light microscope the borders may present a perplexing appearance. Within the border often lie one or a string of several structures resembling small vesicles or vacuoles. The bases of the epithelial cells may appear vacuolated in a similar fashion. The exact nature and significance of this structural appearance is not yet known.

The epithelial lining of the terminal portion of the collecting tubule is continuous with that coating the surface of the papilla. Near the tip of the papilla, the latter a cuboidal or columnar epithelium consists of two types of cells. The numerically predominant of these resembles the cells lining the fourth segment of the collecting tubule. The second type occurs singly is highly chromophilic and appears to be either a degenerating cell or one that secretes mucus.

Vasa recta

Vasa recta passing through Zone III and the bordering portion of Zone II en route to and from the papilla are grouped in bundles to form numerous *retia mirabilia* (figs. 13 and 14). Not all capillaries traversing this region are included in *retia*; a substantial number pursue a solitary course between them. Above and below the *retia* capillaries mingle randomly with tubules. An interesting morphologic attribute of capillaries in the *retia* is that their plasma stains avidly with some components used in the Mallory Azan procedure (fig. 14). The enhanced stainability of the plasma suggests that the concentration of its protein constituents is elevated above

normal levels. In contrast, the plasma of capillaries passing individually through these zones stains with normal intensity. Wherever plasma in the lumens of capillaries in the *retia* does not stain so intensely that visualization of erythrocytes is obscured the latter can be seen to retain a relatively normal outline (fig. 13).

Observations made in the present study seem to confirm earlier reports (Longley and Burnstone '58; Longley et al. '58) that a gradient of plasma concentration exists in the papilla of the kidney of the normally hydrated rat. Plasma generally stains most heavily and thus appears to be most concentrated in capillaries at the tip of the papilla (figs. 11 and 12). The plasma becomes progressively less concentrated with increasing distance from the tip. In normally hydrated rats, the gradient of increased staining of plasma is confined to the apical third of the papilla. Longley et al. ('58) reported that capillaries of the papilla contain few erythrocytes. This does not seem generally true for all capillaries near the apex, many contain a normal or high concentration of erythrocytes. Erythrocyte-rich and erythrocyte-poor capillaries at the apex often lie close together and it is possible that the unequal distribution of erythrocytes in apical capillaries could be an artefact. In approximately two-thirds of the rats examined for this study erythrocytes in capillaries near the apex appear crenated (figs. 15 and 16). In full-face view they display a scalloped outline and when viewed edge-on they appear abnormally flattened. The zone in which erythrocytes are crenated coincides more or less with the zone in which the capillary plasma appears concentrated, i.e., the apical third of the papilla. The degree of crenation, like the apparent increase in concentration of plasma, increases progressively with proximity to the apex.

DISCUSSION

The morphologic characteristics of the epithelial lining of the collecting tubule change along its length in a sufficiently clearcut manner to permit us to subdivide it into four segments. In the past the existence of individual segments has been largely overlooked, and the collecting tubule has been dealt with as a single unit by

most morphologists and physiologists. On the basis of physiologic evidence the collecting tubule is assumed to carry out several steps in the overall process of urine formation, and several examples of these can be cited (Koch, '60). It secretes ammonia released by deamination of amino acids in its epithelium. It recovers sodium ions in exchange for hydrogen ions from fluid passing through its lumen. By adjusting its permeability to water in response to the level of antidiuretic hormone in the circulation, it purportedly regulates the rate at which water is withdrawn from the tubular lumen into the surrounding hypertonic papillary interstitium and thus plays an important role in the mechanism for secreting concentrated urine. It is not yet feasible to assign individual functions to each of the four segments of the tubule much less to individual types of cells in each segment, but some functions can be roughly localized within portions of the tubule. The secretion of ammonia and exchange of cations are thought to take place near the origin of the tubule and participation in formation of concentrated urine is limited to the portion of the tubule located within the papilla.

Epithelial cells presumed to carry out active transport of ions commonly contain abundant mitochondria. Cells of this category occur in gastric glands (Sedar '55; Challice et al. '57) proximal and distal tubules (Sjöstrand and Rhodin '53; Pease '55) striated ducts of the parotid gland (Parks '61) and salt-glands of marine birds (Doyle, '60). It is possible that the mitochondria-rich intercalated cells scattered singly in the epithelium of the second segment of the collecting tubule function similarly. It is interesting to recall in passing that the epithelial lining of the toad bladder which can also actively transport ions consists of four different types of cells and that one of these scattered singly among the other cells contains abundant mitochondria (Peachey and Rasmussen, '61; Choi, '63).

According to the currently prevalent theory of the means by which concentrated urine is secreted by the mammalian kidney Henle's loop in the renal papilla acts as a countercurrent multiplier and the vasa recta of the same region act as a

countercurrent diffusion exchanger. The theory asserts that the ascending and descending limbs of Henle's loop have radically different physiologic capabilities. The descending limb is permeable to sodium ions and water; the ascending limb is impermeable to both of these and, moreover, actively pumps sodium ions from its lumen into the papillary interstitium. The vasa recta are presumed to be permeable to salt and water throughout their descending and ascending limbs. Coordinated operation of the countercurrent multiplier and diffusion exchanger produces a gradient of salt concentration in the interstitium of the papilla with maximum concentration reached at the apex. Thus far the theory is supported by physiologic and, albeit to a lesser extent, morphologic evidence.

Throughout the renal papilla (Zones IV and V) both limbs of Henle's loop are classified as thin limbs. They are lined by squamous epithelium which appears only a shade thicker than the endothelium of the vasa recta. At all levels in the papilla, the limbs of Henle's loop appear identical with one another and therefore it is not possible to distinguish ascending from descending limbs. Structural distinctions between the two have not been reported even after more intensive examination by electron microscopy (Pease, '55; Rhodin, '58a). From a morphologist's point of view we can accept only with qualms the conclusion that the profound functional differences between ascending and descending limbs are not expressed structurally. That the epithelium of Henle's loop appears not to have any of the distinctive morphologic properties of many of the other salt pumping epithelia furnishes additional grounds for uneasiness.

Several interesting features of the vasa recta of the renal medulla and papilla have come to light through morphologic investigations. To begin with, the intimate association between arterial and venous capillaries in the retina of the kidney ideally suits them to act as a countercurrent diffusion exchanger and these specialized structures situated at the gateway to the papilla may be the chief means responsible for making sure that the hypertonicity of its interstitium is not dissipated by its vascular supply. Since the retina consist solely

of closely bunched capillaries, their structural design enables the capillaries in the retina, except those situated at the periphery to reach diffusion equilibrium with one another. They cannot equilibrate readily with parenchymal elements for the latter are for the most part excluded from the retina. The remaining lengths of the capillary loops in the medulla and papilla below the retina presumably continue to act as countercurrent diffusion exchangers with the difference that, since they are dispersed individually at random in the parenchyma, they equilibrate primarily with adjacent limbs of Henle's loop and collecting tubules.

Examination by electron microscopy reveals that the fine structure of ascending and descending branches of the vasa recta in the retina mirabilia is quite different. Where these differences arise above the retina and how far they persist below have not yet been studied. The question why descending or "arterial" limbs of the retina are lined by continuous endothelium whereas ascending or venous limbs are lined by fenestrated endothelium may also be raised, although there is as yet no satisfactory answer. On the basis of physiologic data gathered in studies of other organs, we have good reason to suspect, on the basis of this difference in morphology that the wall of the descending capillaries should be less permeable than that of the ascending (Mayerson et al. '60). Interestingly enough arterial and venous capillaries in the rete mirabile in the swim bladder of the toadfish show similar structural differences despite the fact that the role of the rete in this case appears to be to prevent gas rather than ions from escaping into the general circulation (Fawcett and Wittenberg, '59).

Assuming that the increased avidity for stains of plasma in the capillaries of certain regions is a sign of increased concentration of its proteins, we should draw attention to the observation that the concentration of plasma protein is elevated in two separate locales: the retina mirabilia and the apex of the papilla. The concentration may be higher at the apex for the plasma stains more avidly there and often the erythrocytes appear crenated. Plasma in vasa recta linking the two regions of

elevated concentration appears to be of normal concentration. Since the walls of capillaries behave like semipermeable membranes (Pappenheimer '53) changes in concentration of the contents of capillaries should in turn reflect changes in osmolarity of the surrounding interstitium. A zone of increased osmolarity at the apex of the papilla is more or less consistent with the countercurrent theory but the tenets of the theory do not provide an explanation for the existence of a second zone of hyperosmolarity at the level of the retina mirabilia. Intimations of the existence of hypertonic interstitium in the vicinity of the retina appeared in a recent preliminary report of an autoradiographic study (Mercer et al. '63). However Bray ('60) using microcryoscopic techniques, measured the osmolarity of the cortex and the several subdivisions of the medulla of the rat kidney. In disagreement with our findings he did not observe another region of pronounced hyperosmolarity associated with the retina mirabilia.

Ullrich and his colleagues recently published reports of two studies in which they examined the composition of blood samples obtained by micropuncture from vasa recta near the tip of the papilla of anesthetized hamsters. In one study (Ullrich et al. '61b) they compared the concentration of hemoglobin number of erythrocytes, and hematocrit of individual samples and concluded that erythrocytes in these capillaries are shrunken as a consequence of the hypertonicity of the plasma. Our observations confirm this finding. The other study (Ullrich et al. '61a) reports findings that do not seem compatible with our own. They found that the osmotic pressure of plasma from the vasa recta of the papillae of different animals ranged from 1.2-3.8 times as great as that of systemic plasma. In contrast, the concentration of plasma proteins in all plasma samples was more or less constant, averaging only 1.2 times as great as that of systemic plasma. On the basis of determinations of sodium and chloride concentration, they concluded that when the osmolarity of the plasma in the vasa recta exceeds that of systemic plasma, the additional solute consists chiefly of these two ions. These findings imply that ions can enter the lumens of vasa recta

faster than water molecules leave and therefore that the semipermeable capillary wall is actually less permeable to water molecules than to hydrated sodium ions with a diameter approximately three times as large. Furthermore if we assume that the glomerular membrane of mammals is relatively impermeable to protein and that approximately 10% of the fluid entering a glomerulus passes through the filter the concentration of protein in the plasma of efferent glomerular arterioles the principal source of blood for the papilla, should be approximately 11 times as high as that of systemic plasma. According to their findings, the concentration of protein would be nearly the same in plasma entering the vasa recta as in vasa recta at the apex of the papilla, and no gradient of plasma protein concentration should exist in the medulla or papilla.

A number of reports that contradict their findings can be cited. In this study as well as in an earlier one (Longley and Burstone '58) densely stained material believed to be concentrated plasma protein was observed in vasa recta near the apex of the papilla. Furthermore dyes bound to plasma protein in vasa recta increase progressively in concentration with increasing proximity to the apex of the papilla (Longley et al '60). Finally Thurnau et al. ('60) found a gradient of increasing concentration of plasma albumin from the base to the apex of the papilla in vasa recta of the hamster kidney. Maximum concentrations ranging from 2.1-2.9 as great as that of systemic plasma were reached at the apex.

Blood circulating through the renal medulla and papilla is drawn principally from efferent glomerular arterioles of juxtamedullary glomeruli. These receive blood from intralobular branches of interlobular arteries a short distance after the latter arise from arcuate arteries. Owing to the physical characteristics of blood flow through interlobular arteries (Pappenheimer and Kintner '56) erythrocytes under normal conditions are purported to be concentrated in an axial stream in the lumen of interlobular arteries whereas the periphery of the stream consists largely of plasma. Intralobular arteries branch at right angles from their parent artery. As

a consequence of the unequal distribution of the erythrocytes in the lumen of interlobular arteries intralobular arteries arising near the border of the medulla should, on the one hand, be perfused with blood containing few erythrocytes and blood perfusing peripherally situated intralobular arteries should on the other hand, be perfused with blood relatively enriched with erythrocytes. A further consequence of the "plasma-skimming" phenomenon is that the circulation to the medulla should contain few erythrocytes. Physiological data obtained from micropuncture experiments substantiate the occurrence of "plasma-skimming" (Ullrich et al. '61b) but, to our knowledge morphologic studies primarily designed to evaluate the validity of the hypothesis have not yet been carried out. cursory inspection of our specimens, admittedly not ideal test objects for this purpose does not uncover an obvious scarcity of erythrocytes in the renal medulla or papilla, but this point requires additional scrutiny before more definite statements can be made.

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PLATE 1

EXPLANATION OF FIGURES

- 2 A segment of the convoluted portion of distal tubule in Zone I crosses the field. Part of another lies along the upper margin of the figure. Blunt pseudopod protrude from the pieces of a number of the cuboidal lining cell into the lumen of the tubules. Rodlets in the cytoplasm of the lining cells are identified as mitochondria. They seem to be bent from the pseudopods. In the basal cytoplasm, long filamentous mitochondria form prominent palisade normal to the basal surface of each cell. $\times 2,040$.
- 3 A longitudinal section through a convolution of the initial segment of collecting tubule in Zone I. Its epithelial lining is formed by two different types of cells. The majority are ordinary lining cells, and mitochondria are distributed in their cytoplasm without any obvious pattern. Transitional cells can be recognized along the upper left margin of the tubule as well as elsewhere in its border by the fine filamentous mitochondria forming palisade in their basal cytoplasm. The cytoplasm near the apical borders of some lining cells appears free of mitochondria. $\times 1,770$.

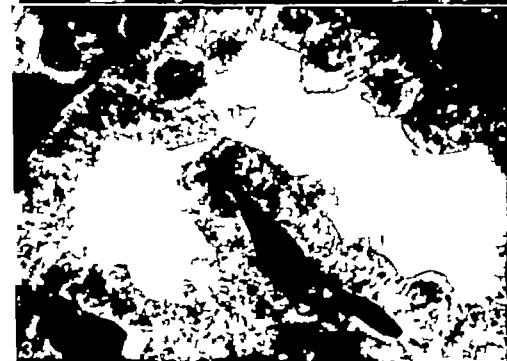


PLATE 2

EXPLANATION OF FIGURES

- 4 A cross section of an initial segment of collecting tubule in Zone I. Ordinary lining cells contain predominantly filamentous mitochondria in their cytoplasm. Mitochondria in transitional cell in the upper left margin of the tubule form a palisade in the base of the cell. $\times 2,340$.
- 5 A cross section of the second segment of collecting tubule in Zone I. The lining cells are broader and not as tall as cells of the initial segment. The ordinary lining cells appear to contain filamentous mitochondria. The two more darkly stained cells in the epithelial lining are identified as intercalated cells. They stain more deeply because of the dense concentration of mitochondria in their cytoplasm. $\times 1,970$.

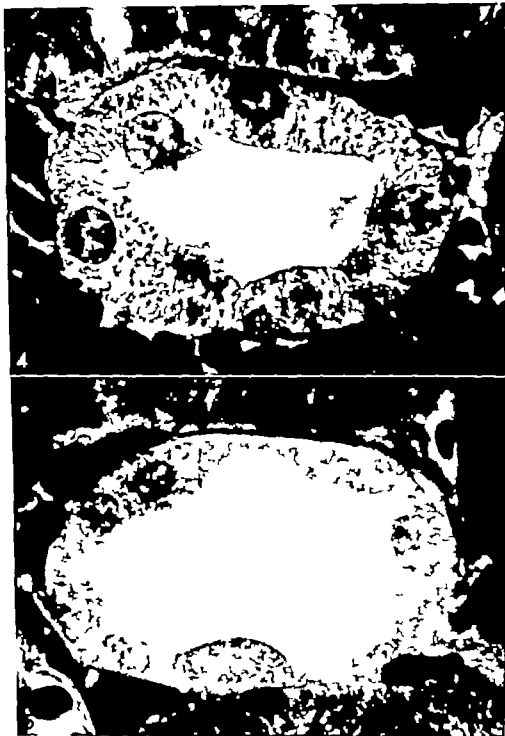
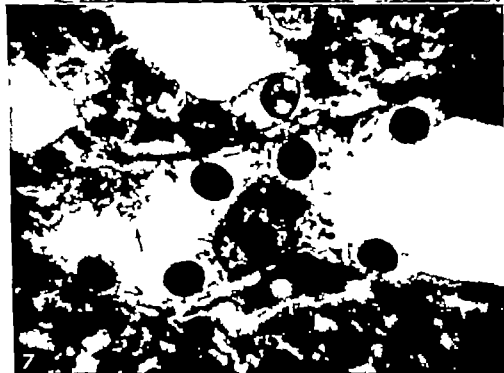
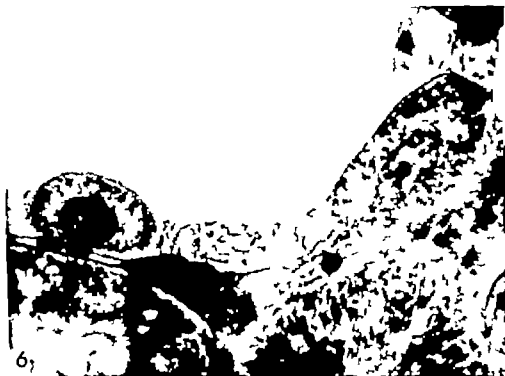


PLATE 3

EXPLANATION OF FIGURES

- 6 A portion of the epithelial lining of the second segment of collecting tubule in Zone I. Two intercalated cells can be recognized by their dense population of mitochondria. They are broader than ordinary lining cells, and because they also are generally taller they protrude farther into the lumen. $\times 3,040$
- 7 A tortuous collecting tubule in Zone II extends from left to right in the figure. In the center of the figure the plane of section grazes the epithelial wall of the tubule, and an intercalated cell is prominent in the tangentially sectioned epithelium. Its numerous mitochondria, largely of spherical form distinguish it from surrounding ordinary lining cells. A second intercalated cell (arrow) may also be present. Distal tubules ascending towards the cortex appear in the upper portion of the figure. In the lower portion lie straight portions of proximal tubules descending towards the papilla. $\times 1,840$.



Abbreviations

CT collecting tubule
DT distal tubule
HL, thin limb of Henle's loop

PLATE 4

EXPLANATION OF FIGURES

- 8 A portion of the second segment of collecting tubule in the outer portion of Zone IV extends across the figure from left to right. Just above the thin limb of Henle's loop. Other parenchymal elements in the field are difficult to identify. The epithelium lining the tubule is of low cuboidal height. Arrows indicate the location of three intercalated cells. Each of the ordinary lining cells lying between the two intercalated cells in the lower border of the tubule has a single cuticular and unexplained protuberance in its apical border just over the nucleus. $\times 1,700$
- 9 A portion of the third segment of collecting tubule in the inner portion of Zone IV. Ordinary lining cells are the sole constituents of its epithelial lining, and they are of cuboidal height. Limbs of Henle's loops (HL) also appear in the field. $\times 1,840$.

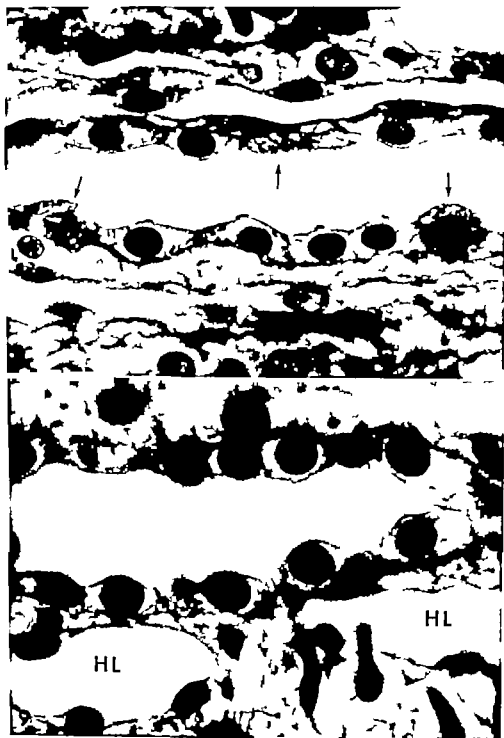


PLATE 5

EXPLANATION OF FIGURES

- 10 A portion of the fourth segment of collecting tubule situated near the apex of the renal papilla. Its epithelial lining is comprised of a single type of low columnar cell. The borders between adjacent epithelial cells are singularly distinct in this region. Structures resembling vesicles are poorly visualized in the intercellular borders as well as along the bases of number of epithelial cells. $\times 1,700$
- 11 This figure illustrates the diverse appearance of some capillaries at the tip of the papilla. One capillary (A) cut in cross section contains erythrocytes that appear crenated, and no plasma is visible around them. A second capillary (B) contains crenated erythrocytes surrounded by homogeneous plasma of appreciable density. A third capillary (C) contains erythrocytes that are almost completely obscured by its densely staining plasma. Collecting tubules (CT) and limbs of Henle loops (HL) also appear in the field. Their lumens appear empty. $\times 1,630$.

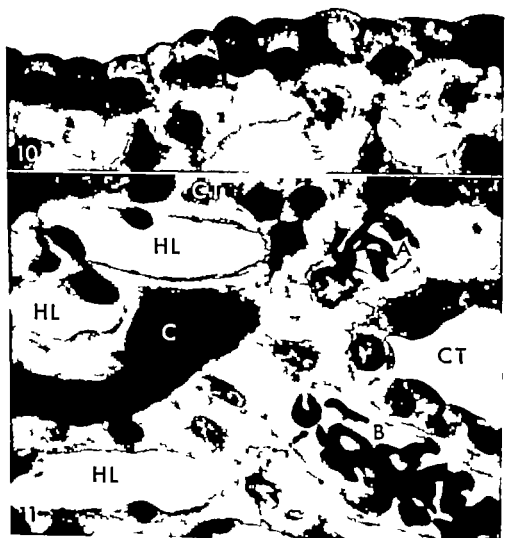


PLATE 6

EXPLANATION OF FIGURE

- 12 A longitudinal section through the tip of the renal papilla. Capillaries of this region form a branching network and are easily singled out because deeply stained plasma opacifies their lumens. Collecting tubules in the field have broad, tortuous empty lumens bordered by tall cuboidal or low columnar epithelial cells. Limbs of Henle loops are almost bent from the field. The capillaries and parenchymal tubules are separated from one another by substantial amounts of interstitial tissue. $\times 200$.



PLATE 7

EXPLANATION OF FIGURE

- 13 A longitudinal section through a rete mirabile passing through Zone III. Some capillaries of the rete contain plasma as well as erythrocytes, whereas others contain only plasma. Erythrocytes in the capillaries have a relatively normal outline. The intensity with which plasma stains suggests that it is more concentrated than in most other regions of the renal vascular bed. Parenchymal elements bordering the rete include limbs of Henle's loops (HL), collecting tubules (CT) and ascending portions of distal tubules (DT) $\times 970$

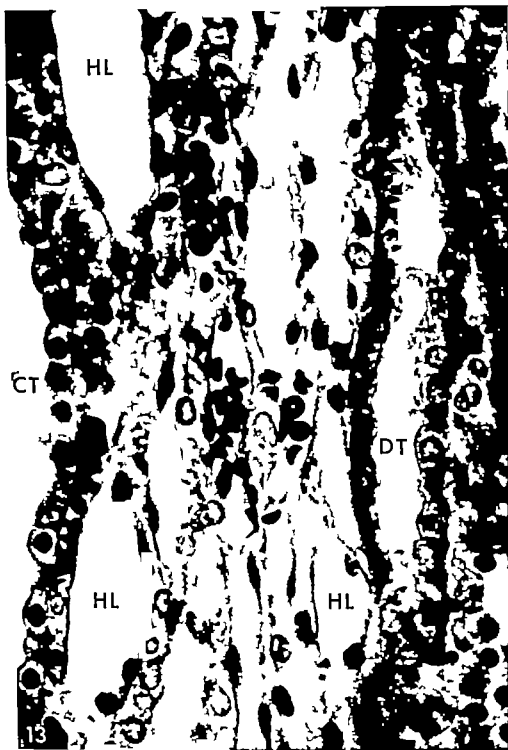


PLATE 8

EXPLANATION OF FIGURE

- 14 A longitudinal section of rete mirabile passing through Zone III. The plasma within capillaries of the rete stains so intensely that it obscures visualization of erythrocytes in the capillary lumens. The capillaries are bordered by limbs of Henle loops (HL) and ascending portions of distal tubules (DT) $\times 920$.

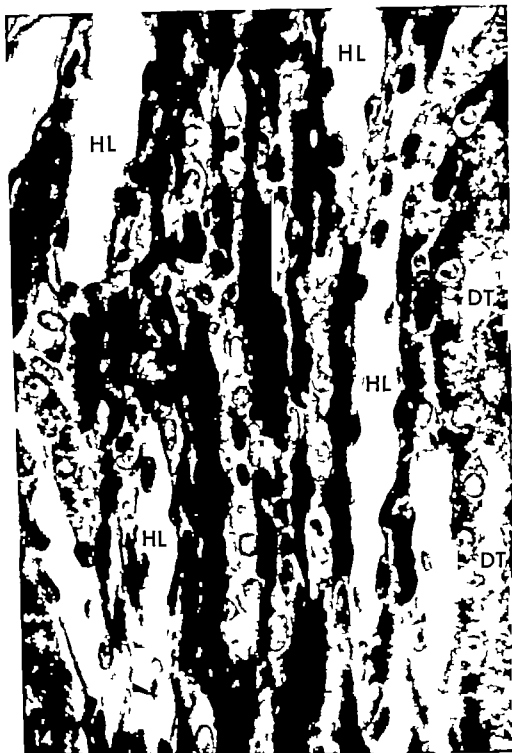


PLATE 9

EXPLANATION OF FIGURES

- 15-16 Capillaries near the tip of the papilla. The erythrocytes in the capillary lumens are crenated. Viewed edge-on, they appear as thin flattened discs and are no longer biconcave. In full-face view number display the classic scalloped outline characteristic of crenation. Their blood plasma is homogeneously stained. Portions of limbs of Henle loops and of fourth segments of collecting tubules also appear in the fields. Liberal amounts of interstitium separate acellular and parenchymal elements. The interstitium appears to contain a single unique species of cell from which many fine cytoplasmic processes radiate to terminate on neighboring capillaries, Henle's loops or parenchymal tubules. The matrix of the interstitium appears homogeneous and relatively devoid of connective tissue fibers. $\times 1,770$ (fig. 15); $\times 1,840$ (fig. 16)



An Electron Microscopic Study of the Ependyma and Subependymal Glia of the Lateral Ventricle of the Cat¹

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ABSTRACT Portions of the wall of the lateral ventricles of the cat were obtained directly and after initial chrome-osmium perfusion. After further fixation they were embedded in Epon-812, sectioned on a Porter-Blum microtome and examined in the electron microscope. Observations on the ultrastructure of ependyma and subependymal glia of the feline lateral ventricle are described. The ependyma contains pale cytoplasm with many vesicles, network of fibrils, endoplasmic reticulum, Golgi apparatus and numerous dense mitochondria. Cilia are present along the luminal surface which have a well defined basal body from which cross-striated rootlets diverge to make close contact with other ciliary rootlets and enter into complex relationships with specialized cell junctions composed of mitochondria in linear arrangement along an intracellular membrane studded with zonulae adherens. These rootlets thus form a communicating link between cilia and morphologic relation to the plasma membrane between ependymal cells. Theories of metachronal motion in ciliated mammalian epithelia may incorporate such structures in the future. Three varieties of subependymal glia are described. Oligodendrocytes are the least common but are observed in close relation to myelinated axons. Fibrous astrocytes send short processes beneath the ependyma, but ependymal astrocytes send thick processes deep into the underlying white matter. No ependymal cells are observed to send processes into the white matter and it is suggested that in the adult cat this is the property of the ependymal astrocyte.

Ependyma of the lateral ventricles of mammals has received little specific attention by electron microscopists. Tennyson and Pappas ('62) have examined the fine structure of the ependymal lining of the aqueduct in fetal, early postnatal and adult rabbits. Brightman and Palay ('63) recently have reported on ependyma of the third ventricle in the rat. Others who have contributed to the accumulated knowledge of the ultrastructure of ependyma include Luse ('56), Palay ('58) and Brightman ('61) on the ependyma of the rat; Olschke ('58) of the frog; Duncan ('57) and Belairs ('59) of the embryonic chicken; and Schultz, Berkowitz and Pease ('58) of the central canal in lamprey spinal cord.

Fleischhauer ('60-'61) emphasized the histologic variability of ependyma from various sites within the ventricular system of the cat. Draskoci, Feldberg, Fleischhauer and Haranath ('60) demonstrated a differential uptake of histamine between various areas of the cerebral ventricles in the cat. Feldberg and Fleischhauer ('60) showed a similar difference in uptake of

bromphenol blue. They then considered a possible correlation between structure of ependyma and its underlying glia with this differential absorption.

Therefore a study of the ultrastructure of the ependyma lining the lateral ventricle of the cat is of interest both in the comparative study of ependymal cells among various species as well as between various areas in the ventricular system.

MATERIALS AND METHODS

Six adult cats were anesthetized with pentobarbital sodium and craniotomies performed leaving the dura intact. In three animals an 18 gauge hypodermic needle was placed in the left lateral ventricle by stereotactic technic. The animals were exsanguinated and simultaneously the ventricular systems perfused with Dalton's chrome-osmium fixative for 15 min-

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utes. Blocks of the lining of the lateral wall of the body of the lateral ventricle were removed and placed in fresh fixative for an additional 30 minutes. In three animals tissue was quickly removed from the same part of the wall of the ventricle following exsanguination and placed directly into Dalton's solution.

Dehydration was by 10% increments of ethanol from 10 to 100%. Tissue was then placed in toluene prior to infiltration in Epon-812. Polymerization was at 60°C for approximately 18 hours. Thin sections cut on glass knives in a Porter Blum microtome were mounted on uncoated grids and stained with lead or uranyl acetate. Sections were examined in a RCA EMU 2D or 3G electron microscope. Original micrographs were at 2,000 to 11,000 diameters and subsequently enlarged photographically as desired.

OBSERVATIONS

The ependyma of the lateral ventricles of the adult cat fundamentally is similar to ependyma described in other mammalian species (Tennyson and Pappas '62, Brightman and Palay '63). It is a ciliated, cuboidal to columnar epithelium that rarely is more than one cell thick (fig. 1). The ven-

ular or luminal plasma membrane is complexly organized into numerous microvilli and also extends out along the cilia. Rarely a microvillus has a bulbous terminal expansion (fig. 2). There also are other membrane outlined structures containing vesicles and having only a narrow connection with the cell (fig. 3). In addition to vesicles with or without dense centers some may even contain mitochondria having irregularly branched cristae (fig. 4). The ependymal cytoplasm is pale with scant vesicular endoplasmic reticulum, a prominent Golgi apparatus and numerous dense branched mitochondria (figs. 1-5). A tracery of delicate branching fibrils occurs throughout the cytoplasm (figs. 6-7). Along the luminal plasma membrane and at cell junctures these fibrils are arranged in a parallel array and occasionally form small bundles (figs. 6-8). Prominent collections of perinuclear fibrils are absent in contrast to those reported in the rat (Brightman and Palay '63). Clear vesicles 20-100 m μ in diam-

eter are distributed throughout the cytoplasm and multivesicular bodies are located in the portion in close association with basal bodies of cilia in some instances (figs. 6-9). These multivesicular bodies have a single membrane and contain packets of vesicles approximately 100-200 Å in diameter within a particular matrix (fig. 9). Large ovoid nuclei with well defined nucleoli are located near the base of the cell (figs. 1-5). No basement membrane separates ependymal cells from the subependymal glia and white matter (figs. 1-10).

In the cat, ependymal cilia contain the usual two central filaments surrounded by nine paired peripheral filaments radially arranged. In favorable sections condensations are observed midway between the central and peripheral filaments corresponding to subfibers (Gibbons and Grinstead '60). The proximal portion of each cilium is contained within a depression or pit in the cell surface the membrane of which is more dense than elsewhere (figs. 11-12, 13). The plasma membrane at the neck of the cilium is narrowed with close packing of its peripheral filaments and termination of its two central filaments (figs. 12, 13).

The wall of the basal body is formed by a continuation of the nine peripheral paired filaments. They have a parallel course and are tubular in appearance. Although the center of the basal body remains pale it is surrounded by a dense filamentous cytoplasm (figs. 11-12, 13) that often is continuous with that about other basal bodies sometimes even joining the dense specialized cytoplasm at the intercellular junctures (figs. 7-13).

Each of the tubular filaments within the basal body gives rise to multiple cross-striated rootlets along the entire extent of the basal body including its termination. The tubular structure of the filaments disappears shortly after origin of the rootlet (fig. 13).

The dense cytoplasm with its enclosed ciliary rootlets measures approximately 800-1,000 Å at its origin tapering to 90-100 Å through most of its length. Rootlets diverge widely from their basal bodies and intertwine with rootlets from neighboring basal bodies and sometimes extend deeply

into the cell (fig. 11). Their cross-striations form a characteristic by which they may be recognized when isolated from the basal body. Rootlets from adjacent basal bodies repeatedly touch, fuse or cross although each basal body otherwise remains unconnected to its neighbor (fig. 14).

The cytoplasm immediately around the basal body as well as the rootlets deep in the cell are cross-striated by dense bands about 700–800 Å apart (figs. 11, 12, 13, 14) that may be resolved into two electron dense lines separated by a pale central zone (fig. 12). One or two narrower intra-period lines occur within the primary banding (figs. 9, 12, 13). Cross-banding is apparent in unstained sections as well as after staining with either uranyl or lead acetate. Mitochondria often occur in close apposition to the rootlets; however, no consistent relation of cristae to the periodicity of banding can be discerned. Some rootlets extend into a mitochondrial *zonula adherens* complex (fig. 15).

Cross-striated structures several μ m in diameter are located adjacent to the nucleus (fig. 11). These structures are rarely seen and serial sections would be necessary to determine their exact origin, however it is possible that they may represent either a fusion of several rootlets or a tangential section of a centriole in which the tubular component is inapparent. They are the only perinuclear specialization of the cytoplasm that was seen in this study.

The membranes of contiguous cells near their luminal surfaces are studded with *zonulae adherens* which in tangential sections form an almost continuous line (fig. 6). Two modifications of these membranes are noted. The first corresponds to the *zonula occludens* with fusion of the two cell membranes at the ventricular surface and occasionally even at deeper levels with the appearance of an adjacent *zonula adherens* immediately below (figs. 6, 8). The second modification has a complex ultrastructure (figs. 2, 7, 15, 16). At the luminal surface cells usually are bound together by a *zonula adherens* with each cell membrane remaining distinct, but occasionally a *zonula occludens* tightly closes the intercellular space. *Zonulae adherens* extend for a short distance from the luminal surface of cells. Mitochondria pal-

sade along each side of cell junctures. The space between mitochondria and plasmalemma is packed with fibrils and vesicles (fig. 15). The fibrils are arranged parallel to the cell membrane and apparently have no attachment to the dense inner component of the *zonula adherens*. The vesicles have a pale center and are indistinguishable from other cytoplasmic vesicles. Discrete cross-striated fibers, presumably ciliary rootlets, pass between mitochondria into the fibrillar and vesicular region to terminate near the linearly arranged mitochondria (figs. 15, 16). At deeper levels cell membranes possess no specialization and soon are separated by processes of underlying glia or by processes of other ependymal cells (figs. 5 and 10).

Three distinct types of glia underlie the ependyma and occasionally occur side by side and hence are not the product of differential rates of fixation. The first and least common contains a large dense oval nucleus and a scant dense cytoplasm. The perinuclear region is dense because of its rich content of ribonucleoprotein (RNP) particles, endoplasmic reticulum, and other organelles but with a notable absence of fibrils. Their infrequent elongated processes are small, contain densely packed fibrils and usually are oriented parallel to the surface of the ventricle (fig. 10). Myelinated axons touch these cell bodies and their processes. The other and more common cell types have relatively clear cytoplasm of similar density to that of ependymal cells. Their nuclei are ovoid to elongated and contain pale areas in contrast to the homogeneous density of nuclei of the first cell type. Golgi apparatus, RNP particles and endoplasmic reticulum are scattered sparsely throughout the pale cytoplasm. Cell processes of moderate and small diameter course parallel to the base of the ependyma, intertwine irregularly with similar processes and remain relatively superficial in the white matter (fig. 10). Other cells with identical cytoplasm send off large processes which plunge deep into the underlying white matter (fig. 17). Small branches arise perpendicularly from the large penetrating processes and interdigitate with myelinated axons and other cellular processes. Large

bundles of filaments fill the perinuclear cytoplasm as well as the processes. They intertwine among mitochondria and other cytoplasmic components and insert into the plasma membrane (figs. 17-18). Penetrating processes always arise from the underlying glial cells with pale fibrillar cytoplasm where the cell of origin can be identified.

Capillaries and small arterioles occur immediately beneath the subependymal glia as well as within the underlying white matter. They have an endothelial lining identical with that of other cerebral vessels; however, each capillary is surrounded by a small extracellular space delimited by a double basement membrane that may be focally fused (figs. 19-20). This small extracellular space contains collagen. Occasionally the outer basement membrane extends between surrounding processes, enlarging the extent of the small extracellular space (fig. 20).

DISCUSSION

The variation in ependyma as demonstrated by supravital techniques (Feldberg and Fleischhauer '60) as well as by histochemical methods (Fleischhauer '61) places special limitations on the interpretation and comparison of various electron microscopic studies in different regions of the ventricular system of one species much less between different species. Such comparisons, however, are necessary to advance the growing inquiry into the ultrastructure of ependyma, its organelles and the subependymal glia.

The general appearance of ependymal cytoplasm in the lateral ventricle of the cat with minor exceptions does not differ significantly from previous descriptions of mammalian ependyma. There was no evidence of a perinuclear concentration of filaments as demonstrated by Brightman and Palay ('63) in the third ventricle of the rat, but rather a delicate network of branching filaments similar to that demonstrated by Tennyson and Pappas ('62) in rabbit ependyma. The cytoplasmic vesicular components were similar to those described by these authors. In addition there is in the cat a multivesicular body occurring with regularity near the ventricular surface of ependymal cells. This single

membraned structure containing clear and dense vesicles is of unknown significance.

Since Fawcett and Porter's ('54) detailed description of the fine structure of the basal corpuscle, its similarities, variations and functions have been the subject of extensive ultrastructural investigations (Sedar and Porter '55; Rhodin and Dahlman, '58; Gibbons and Grimstone '60; Fredricsson and Björkman, '62; Olsson, '63; Aitkin and Johnston '63; Dahl, '63, etc.). Fawcett and Porter ('54) noted in the mollusc that ciliary basal bodies have an electron dense wall enclosing a pale center, a well formed basal plate and multiple rootlets with a constant 550-700 Å cross-banding. In amphipods they observed only one such rootlet for each basal corpuscle whereas there were no definite rootlets in the poorly developed ciliary basal bodies of mammals, although cross-banded structures did occur in adjacent cytoplasm.

The fine structure of basal bodies of mammalian ciliated epithelia is now being examined in detail in epoxy-embedded tissue stained by a variety of techniques. Fredricsson and Björkman ('62) demonstrated distinct cross-striations similar to those noted in feline ependyma in basal bodies of cilia in epithelia of the human oviduct. Nagano ('62) described cross-striated fibrils with a 600 Å periodicity in the human spermatocyte that he considered to be associated with its centriole. Tennyson and Pappas ('62) in their extensive study of the development of ependymal cells in the rabbit, mentioned banded rootlet fibers with a 500-700 Å periodicity in embryos but not in adults. Gibbons and Grimstone ('60) also referred to cross-striated, collagen-like fibers underlying some basal bodies of flagella in *Trichonympha*. Recently Grillo and Palay ('63) reported cross-striation of rootlets of cilia in Schwann cells of the rat autonomic ganglia. Dahl ('63) in neurons in the cerebral cortex of rats as has Olsson ('63) in both *Corella* and *Amphitoxus*. Most recently Brightman and Palay ('63) have demonstrated cross-striated bodies in the ependyma of the third ventricle of the rat but could not relate such structures to the basal body or ciliary rootlets. In comparative studies of the rat and mouse as well

as in the present study on the cat, cross-striations have been a common feature of ciliary rootlets in ependymal cells of adult mammals. They are less apparent in thin sections and hence can be overlooked unless specifically sought, and undoubtedly vary in frequency in different species although constantly present in the cat.

The tubular character of the wall of the basal body has been demonstrated by Rhodin and Dahlman ('58) in rat tracheal epithelium, where they noted that the triple tubular component fused into a net like structure deep within the basal body. They also described unstriated rootlets arising only from the tip of the basal body and then curving in a single direction. On the side of the basal body opposite to the direction of the rootlets there was an area of high cytoplasmic density perpendicular to the long axis of the basal body. In our material the basal body appeared similarly organized although rootlets diverged in many directions and arose along its entire extent. In addition the zone of cytoplasmic density entirely surrounded the basal body and was distinctly cross-striated. A very similar configuration of the basal body and rootlet origin was noted by Brightman and Palay ('63). In the present study even the center of the rootlet occasionally was tubular at its origin, a finding similar to that in ciliary rootlets in the avian oviduct (Atkin and Johnston, '63).

Cross-striations of the cytoplasm surrounding the basal body and its rootlets are not as unusual as has been inferred. They have been observed in many species from protozoa (Sedar and Porter '55) to the human being (Fredricsson and Björkman, '62) and in all probability reflect a protein structure. The exact chemical nature of these cross-striations remains unknown although Olsson's ('63) recent observations of mitochondrial cristae closely apposed to the dense bands in lower chordates has been interpreted as suggestive evidence for a high local metabolic demand. In recent years stabilizing properties have been attributed to rootlets principally because of their superficial resemblance to collagen (Fawcett, '61) although light microscopists and physiologists had previously assumed that rootlets

had a relationship to ciliary motion (e.g. Klein, '28 von Gelel, '32 Corliss '61).

Definite fusion and intersection of ciliary rootlets has been demonstrated in the ependyma of the cat. These interrelations are observed both adjacent to the basal body and as deep as the nucleus. These fusions might occur between rootlets of centrioles and basal bodies as well as between two or more basal bodies. In addition, ciliary rootlets extended between mitochondria linearly arranged at the specialized areas of cell junctures. A similar linear array of mitochondria along the plasmalemma has been described by Tenynson and Pappas ('62) in adult rabbit ependyma.

Previous investigations have not emphasized the recurrent close relationships that rootlets form with one another nor have they described the relationship of rootlets to cell junctures. The dangers of physiologic speculation from these anatomic observations are legion, but it is difficult to avoid considering a correlation between metachronal ciliary beat and the necessity of transmission of this rhythm between cilia, and indeed between cilia of different cells. The current theories of transmission have been reviewed thoroughly by Fawcett ('61) and by Sleight ('62) and are beyond the scope of this paper. However if future investigations of other ciliated epithelia reveal similar ultrastructure an adequate explanation of metachronal ciliary activity should weigh the proximity of rootlets to the specialized plasmalemma and their close association to one another.

A detailed discussion of the specialization of the membrane between ependymal cells has recently been published by Brightman and Palay ('63) and this study confirms their observations. They have used the terminology proposed by Farquhar and Palade ('63) which also has been followed in this study.

Two, and possibly three, types of glial cells have been recognized in subependymal white matter in the cat. Previously Palay ('58) described fibrous astrocytes beneath rat ependyma. He compared them with those seen after stab wounds and described a cell containing numerous fi-

PLATE 1

EXPLANATION OF FIGURE

- 1 A low magnification of ependyma of the lateral ventricle of the cat illustrates single ependymal cell layer with underlying processes and myelinated axons. Portions of three ependymal cells are separated by plicated membranes which interdigitate complexly. Cilia and microvilli are seen in cross section at the luminal surface. Mitochondria are prominent above the nuclei. The clear cytoplasm contains many fibrils, RNA particles, ergastoplasm, vesicles and Golgi apparatus. Processes with similar cytoplasm to ependymal cells are noted at their base as is a single dark process containing closely packed fibril. A basement membrane separates ependymal cells from the underlying processes and myelinated axons. $\times 13,000$.



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PLATE 2

EXPLANATION OF FIGURES

- 2 The ventricular surface of ependymal cell exhibits microvilli and other cell processes with narrow bases extending into the ventricular lumen. At the center is an example of the close relationship of mitochondria to a tangentially sectioned plasma membrane with *zonula adherens* to the cell surface. $\times 20,000$.
- 3 A cell process similar to those in Figure 2 contains numerous light and dark vesicles. $\times 20,000$.
- 4 Similar processes to those in Figures 2 and 3 contain mitochondria. In addition numerous vesicles are present. $\times 20,000$.



PLATE 3

EXPLANATION OF FIGURES

- 5 A tangential section of ependymal cells demonstrates cilia and their basal bodies at upper right. In the lower half of the illustration processes of ependymal cells and of subependymal glia extend between cells. $\times 8,000$
- 6 A tangential section through the most superficial portion of ependymal cells demonstrates microvilli and cilia at the luminal surface and numerous *zonulae adherens* form almost continuous lines between the three cells illustrated. A *zonula occludens* is illustrated at right center $\times 12,000$



PLATE 4

EXPLANATION OF FIGURES

- 7 An example of mitochondria in close association with the specialized cell juncture containing several *zonula adherens* is shown at left. In addition, it can be noted that the dense cytoplasm from a neighboring basal body becomes continuous with the dense fibrillar cytoplasm along the cell membrane. $\times 48,000$.
- 8 An example of *zonula occludens* with a *zonula adherens* immediately deep to its inner extent. A small collection of parallel arranged fibrils courses beside the cell juncture. $\times 70,000$
- 9 A high magnification of two multivesicular bodies shows the single limiting membrane and the smaller size of their vesicles than those shown generally in the surrounding cytoplasm. $\times 50,000$



PLATE 5

EXPLANATION OF FIGURE

- 10 An ependymal cell is seen in the upper half of the illustration with typical plicated intercellular membranes. A fibrous astrocyte with an elongated nucleus and process extending parallel to the ventricular surface lies immediately beneath the ependymal cell. In close approximation with myelinated axon glial cell with dense cytoplasm is noted. Fibrils are present in the process at right but are not apparent in the perinuclear cytoplasm. / 8,000



PLATE 6

EXPLANATION OF FIGURE

- 11 A relatively thick section of portion of the apex of two ependymal cells illustrates cilia projecting from depression in the plasma lemma. The peripheral filaments of the cilia pack together and the plasma membrane and cytoplasm become more dense at the neck of the cilium. Within the basal bodies the peripheral filaments of the cilium continue as the tubular component of the wall. The walls of the basal body are parallel in longitudinal sections but ellipsoid when sectioned obliquely. Numerous rootlets penetrate deeply into the cytoplasm and come into close proximity to one another. At upper left the rootlets from basal body pass into specialized cell junction. A multivesicular body is present at lower right and cross-striated structure approximately half micron across is present at lower right. $\times 28,000$

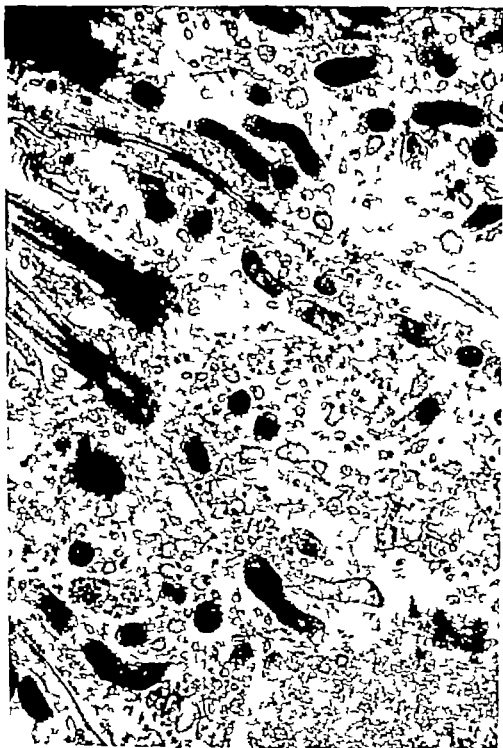


PLATE 7

EXPLANATION OF FIGURES

- 12 A longitudinal section through three basal bodies and their cilia demonstrates the tubular character of the filaments of the wall and the cross-striations of the surrounding dense cytoplasm. In the central basal body the lucent center of the major cross-striation is evident. $\times 46,000$.
- 13 A longitudinal section of two basal bodies and an oblique section of another contrasts the appearance produced by the plane of section. The tubules of the wall are distinctly parallel in the lower basal body while they appear to converge in the upper example. Rootlets arise from the sides and termination of the tubules and course in close proximity to a mitochondrion. The dense fibrillar cytoplasm surrounding the basal body extends laterally and appears continuous with that of its neighbor. $\times 46,000$.
- 14 Several rootlets illustrate how frequently anastomoses occur between these cross-striated structures. At lower center rootlets from basal body or centriole join rootlets of second basal body almost at their origin. At lower right third cross-striated structure almost touches the same rootlet. At upper right two rootlets appear to cross. $\times 18,000$.

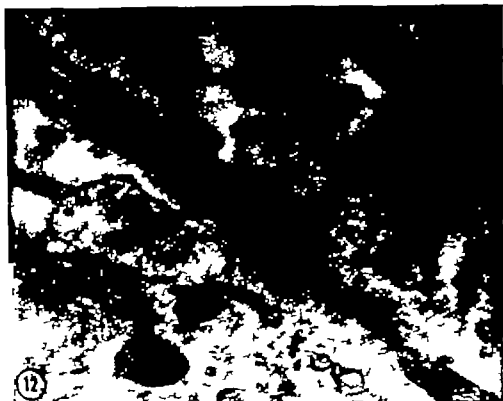


PLATE 8

EXPLANATION OF FIGURES

- 15 A high magnification of cell junction which demonstrates the dark external component and less dense inner component of the *zonula adherens*. Mitochondria palisade on each side of the cell junction and the space between is crowded with fibrils and vesicles. A cross-striated rootlet courses into close relation to the mitochondria and appears to be directed between them. The lucent center of the major cross-striation is apparent in the rootlet as are three or four intraperiod dense lines. $\times 80,000$.
- 16 An example of a tangentially sectioned specialized cell junction demonstrates cross-striated structure presumably ciliary rootlet, lying between mitochondrion and the nearby *zonula adherens*. $\times 30,000$.



PLATE 9

EXPLANATION OF FIGURES

- 17 An ependymal astrocyte sends a large process deep within the periventricular white matter. A small portion of the perinuclear cytoplasm is noted in the upper portion of the illustration while the giant process sending small processes laterally descended between myelinated axons. Clumps of filaments fill the center of the process with other organelles being present toward the periphery. $\times 10,000$
- 18 Several processes of subependymal astrocytes demonstrate cytoplasmic filaments inserting into the cell membrane. $\times 20,000$.

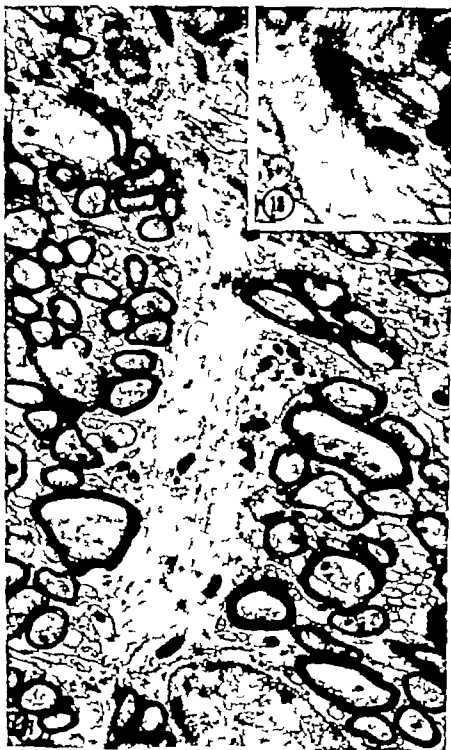


PLATE 11

EXPLANATION OF FIGURE

- 20 Another capillary demonstrates the extension of the basement membrane between astrocytic processes (upper right). Fusion of the two components of the basement membrane extend over several short segments in the center of the illustration. $\times 20,000$.



The Anatomy of the Arterial Supply to the Cranial Regions of the Sheep and Ox

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ABSTRACT By means of neoprene latex injected preparations the anatomy of the arterial supply to the brain has been determined in the sheep and ox. In these two ruminant species, blood destined for the Circle of Willis and thence the brain must first pass through well-developed intra-cranial carotid rete. The main source of blood supply to the carotid rete in the sheep is from the external carotid artery via branches of the internal maxillary artery.

In both the sheep and the ox, the internal carotid artery is poorly developed in the young animal and the portion proximal to the carotid rete is absent in the adult. The internal carotid artery in animals of all ages, can be traced through the rete to emerge as the efferent vessel, which divides to form the Circle of Willis.

In the ox, the main source of blood supply to the intra-cranial carotid rete is the external carotid artery via branches of the internal maxillary but, in addition the rete communicates directly with the vertebral arteries by way of the basilar-occipital arterial plexus.

Unlike most other species, the basilar artery in both sheep and ox has only tenuous connections with the vertebrals. In both species, the basilar artery tapers caudally and is continued as the ventral spinal artery. The basilar can therefore be regarded as caudally directed branch of the Circle of Willis in both these animals. A well-developed occipito-vertebral anastomosis is marked feature of the cephalic circulation in both sheep and ox.

Before proceeding to experimental studies on the cephalic circulation in the sheep and ox (Baldwin and Bell '63a '63b) it has been necessary to ascertain the routes by which arterial blood could reach the brain in these animals. Search of the literature revealed a paucity of reliable information on this topic: the recognized text books of veterinary anatomy give the subject scanty consideration. Slason ('53) refers only to major differences between the cerebral blood supply of the ox in comparison with the horse and hardly mentions the cranial vessels in the sheep. Chauveau (1891) also takes the comparative viewpoint using the horse as the type subject but gives some account of the distribution of the relevant vessels in both ox and sheep. Texts by Montane and Bourdelle (17) and McLeod ('58) were not considered sufficiently complete or reliable to provide a basis for experimental work.

Tandler (1899) in his classical work on the arteries of the brain in a wide variety of mammals mentions the ox briefly and assumes the anatomy of these vessels in the sheep to be similar. Schmidt (10)

gives an accurate account of the cranial blood vessels of the ox which has obviously provided a basis for the text of Ellenberger and Baum (43). Ask-Upmark ('35) also considers that the cranial arteries of the sheep are identical with those of the ox. Daniel, Dawes and Pritchard ('63) describe the carotid rete and its formative arteries in a number of species including the sheep and ox, but they have necessarily concentrated upon these structures and only refer in passing to the vertebral arteries. Furthermore these latter authors were only able to examine one specimen of the ox, that of a four-month-old calf.

The carotid rete which is a striking feature of the cephalic circulatory system in both the sheep and ox is believed to have been discovered by Herophilus, although the first detailed account of it is given by Galen (Cole '44).

More recent investigations of the rete include those of Ask-Upmark ('35 '44 and '53). Its histological structure has been

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studied by Boissezon (41) and Legaït (45). Davis and Storey (43) have described the cranial blood vessels of the cat including an account of the rete. The paper by Andersson and Jewell (56) on the distribution of carotid and vertebral blood in the brain and spinal cord of the goat contained some observations on the hemodynamic significance of the carotid rete.

The present paper sets out the results of an anatomical investigation of the distribution of the arterial blood vessels of the cranial region in these two ruminant species.

MATERIAL AND METHODS

Material was examined from 20 oxen. The specimens varied in age from one week to five years but the majority of the animals were calves a few weeks old. Material was examined from 20 sheep ranging in age from birth to over four years. Two pigs approximately four months of age, were examined. Direct measurements of the external diameter of the carotid and vertebral arteries were made on anesthetized animals under going surgical preparation for experimental studies.

Injection of Neoprene Latex

Fresh specimens of the sheep and calf, both abattoir material and from animals employed in the experimental work, were used to prepare neoprene latex casts of the vessels of the head and neck.

The neck was usually severed between the fifth and sixth cervical vertebrae. Latex was injected into the carotid arteries in the midcervical region following perfusion with saline in order to remove any remaining blood.

On completion of the injection the specimens were placed in a dilute solution of hydrochloric acid for 24 hours in order to solidify the neoprene latex. The skin which retards subsequent maceration was then removed and the specimens treated in various ways depending upon the type of preparation required.

a. Preparation of a simple Neoprene latex cast. The skinned specimen was placed in concentrated hydrochloric acid for about seven days until the tissues were macerated sufficiently to allow careful re-

moval of the latex casts. The casts were cleaned by placing them into water and removing any adherent tissue debris by brushing, or if fat remained attached to the cast, by placing it in 20% potassium hydroxide for a few days.

b. Preparation of Neoprene latex casts in relationship to the skull and cervical vertebrae. This technique was developed in order to preserve the relationship between the injected vascular system and the skeletal structures. After making a normal neoprene injection and hardening the latex in dilute hydrochloric acid the specimen was skinned and macerated in a water tank at 60 C when after a period of 7-12 days according to the size of the specimen an intact cast together with the skeletal structures remained.

c. Preparation of radiopaque Neoprene injections. A stabilized suspension of barium sulphate was added slowly with constant stirring to the neoprene latex until a mixture of two parts latex to one part barium sulphate was obtained. Barium sulphate in excess of this caused an increase of viscosity of the mixture and precluded successful injection. The radiopaque latex was injected in the usual way and the cast hardened by immersion of the specimen in acid formalin. Stereoradiographs of such preparations have proved very useful in determining the relationship of the cranial blood vessels to the structures of the head and neck. These specimens have the further advantage that dissection can be carried out and more radiographs taken at subsequent stages.

d. Preparation of Neoprene latex casts of the venous system. These casts were made by retrograde injection of latex into the external jugular veins after perfusion of the specimen with normal 0.9% saline in the usual manner. Specimens were also prepared in which both the arterial and venous systems were injected with neoprene latex simultaneously.

Histological examination of the carotid rete

For microscopical examination formalin-fixed carotid retia from sheep and calves were sectioned at 5 μ and stained with hematoxylin-eosin or Masson's trichrome stain.

Measurement of the common carotid and vertebral arteries in the living animal

These measurements were made with calipers on vessels exposed surgically for experimental studies. The common carotid arteries were measured in the mid-cervical region and the vertebral arteries on their extra-thoracic course near to the foramen transversarium of the sixth cervical vertebra.

OBSERVATIONS

Results in the Ox

The carotid rete The carotid rete in the ox is intra-cranial, lying sub-durally in the cavernous sinus. It consists of two halves which are in communication anteriorly and posteriorly through numerous anastomotic vessels (pl. 1 fig. 4). The rete extends from the foramen orbito-rundum anteriorly to just beyond the foramen ovale posteriorly. It is composed of a complex mass of intertwining anastomotic arteries which are largest on the dorsal surface. The two halves of the rete lie on each side of the pituitary body and, because of the anterior and posterior communicating branches, the rete effectively

surrounds the pituitary body. Arterial blood destined for the Circle of Willis can only reach this structure after passing through the rete. In the ox, the rete possesses an anterior V-shaped extension which enters the optic foramina, one arm of the V accompanying each optic nerve through the foramen (pl. 1 fig. 4). The distal ends of these extensions emerge into the orbital cavity to be joined by small branches from the arteria anastomotica.

The rete receives an afferent blood supply from two branches of the internal maxillary artery: the arteria anastomotica and the ramus anastomoticus. The internal maxillary artery being the continuation of the external carotid artery (pl. 1 fig. 2). The internal carotid artery in the ox is thread-like and contributes to the rete only in the young animal. On the other hand, the large basi-occipital plexus, derived from the vertebral and occipital arteries, constantly makes a large contribution to the rete posteriorly (pl. 2, fig. 8). Another but minor source of blood supply to the rete is from the accessory meningeal artery, a branch of the superficial temporal artery. These branches are given off in the temporal canal and enter the cranial

ARTERIAL ARRANGEMENT IN THE CALF

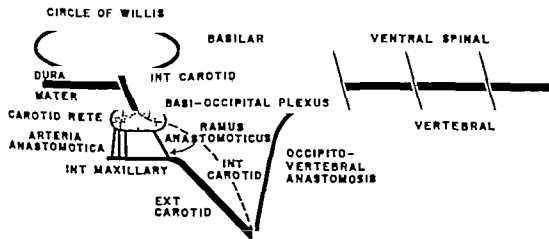


Fig. 1 Diagram illustrating the arrangement of the cephalic arteries in the calf. The dotted line indicates that the internal carotid artery does not persist in the adult.

cavity between the petrous temporal and the parietal bones and supply the lateral part of the rete

The rete has a single efferent vessel the homologue of the distal portion of the internal carotid. This vessel emerges from the dorso-medial surface (pl. 1 fig. 4) to pierce the dura mater before dividing into anterior and posterior branches which unite to form the Circle of Willis

Histological examination shows that the arterial network of the rete is surrounded by a delicate connective tissue adventitia with a layer of endothelial cells on the outside. These cells form the intima of the venous lake surrounding the arterial rete in the cavernous sinus

The Arteria Anastomotica. These vessels arise from the internal maxillary artery and enter the cranial cavity through the large foramen orbito-rotundum (pl. 2, fig. 5) In this foramen they are accompanied by the third fourth and sixth cranial nerves together with the maxillary and ophthalmic divisions of the fifth cranial nerve.

These arteries constitute the major route by which carotid blood from the internal maxillary artery enters the rete. Usually three or four main arterial stems are derived from the internal maxillary artery

and these subdivide as they enter the cranial cavity to supply the antero-lateral border of the rete. Immediately on entering the rete they ramify within it so that their subsequent distribution within this structure cannot be traced by dissection. In addition to the main branches of the arteria anastomotica supplying the rete other small branches arising just anterior to the main ones connect within the orbital cavity with the distal extra-cranial end of the V shaped anterior extension of the rete.

The ramus anastomoticus. In the ox this is a small vessel arising from the internal maxillary artery which enters the cranial cavity via the foramen ovale along with the mandibular division of the fifth cranial nerve (pl. 2, fig. 5) The ramus anastomoticus enters the posterior-lateral border of the carotid rete to ramify immediately within it so that its subsequent course within the rete cannot be identified. The ramus anastomoticus is considerably

smaller in diameter than the combined branches of the arteria anastomotica.

The internal carotid artery. This vessel arises either from the common carotid artery at its division into occipital, external maxillary and external carotid arteries or from the base of the occipital artery. It does not give off any branches during its course to the cranial cavity through the foramen lacerum but in the foramen exhibits a characteristic curl.

The vessel enters the rete caroticus ventrally near its posterior end, but unlike the other afferent vessels does not immediately ramify within the complex and lose its identity for its course through the rete can be clearly established by dissection (pl. 3 fig. 11) As shown by Daniel et al (53) as the internal carotid passes through the rete it is joined by numerous branches so that it rapidly increases in calibre before emerging on the dorso-medial aspect of the rete as the single trunk which pierces the dura mater and divides into anterior and posterior branches to form the Circle of Willis

In specimens from animals a few weeks old the calibre of the internal carotid artery as revealed by latex injection, is almost equal to that of the ramus anastomoticus but with increasing age the internal carotid artery shows marked regression. It has been possible to demonstrate the internal carotid artery in animals 18 months old and in one case, it was still present unilaterally as a fine threadlike vessel in an animal four years old. However it is not a significant source of blood to the rete in animals more than a few weeks old and usually is absent in animals over the age of 18 months. When the rete from an adult animal is dissected although the internal carotid artery proximal to the rete has atrophied, the intrarete portion persists and retains its individuality.

The basi-occipital plexus. This large arterial plexus lies subdurally upon the basi-occipital bone (pl. 2, fig. 8) There is considerable individual variation in the size and complexity of the plexus.

The plexus is supplied posteriorly by the vertebral arteries and laterally by the condylod branch of the occipital artery. The plexus passes forward to unite with the posterior margin of the carotid rete con-

tributing some vessels to the posterior junction between the halves of the rete. Usually it takes the form of three large vessels which enter the rete with a supporting or a "bridging" vessel running between them as they join the rete.

The occipital artery The occipital artery is one of the terminal branches of the common carotid artery. At its origin there is a bulge which is considered to be the cardio-respiratory reflexogenic area of the carotid in ruminants.

The condyloid artery A large branch of the occipital enters the cranial cavity through the hypoglossal foramen and divides into two branches, the anterior limb uniting with the basio-occipital plexus and the posterior limb with the vertebral artery. A large and important occipito-vertebral anastomosis occurs in the ox providing a link between the common carotid and vertebral arteries (pl. 1 fig. 2).

The vertebral arteries. These vessels arise from the subclavian artery on the left side and usually from the brachiocephalic trunk on the right side but occasionally the right vertebral may arise from the right subclavian artery adjacent to the brachiocephalic trunk.

The vertebral arteries leave the thoracic cavity anterior to the first rib and enter the foramen transversarium of the sixth cervical vertebra. Shortly after emerging from beneath the first rib the arteries give off a large branch which supplies the dorsal cervical musculature and which Sisson ('53) terms the dorsal cervical branch. A smaller dorsal muscular branch is given off immediately before the vertebral trunk enters the foramen transversarium of the sixth cervical vertebra.

The vertebral arteries have a typical course in the neck passing anteriorly in the foramina transversaria of the cervical vertebrae. At each intervertebral junction anastomotic branches are given off these cross the floor of the vertebral canal to unite with similar branches from the opposite vertebra. These branches also communicate with each other anteriorly and posteriorly forming irregular polygonal figures on the floor of the vertebral canal. The vertebral arteries and their anastomotic branches communicate with the ventral spinal artery by means of small anas-

tomotic branches which penetrate the dura. Large branches to the cervical musculature are given off at each intervertebral junction.

The vertebral arteries leave the foramina transversaria at the junction of the second and third cervical vertebrae to enter the spinal canal and continue forward to the cranial cavity through the foramen magnum. In their course branches are given off at the atlanto-axial joint which emerge from the dorsal foramen in the wing of the atlas to supply the muscles in this region.

Just inside the cranial cavity the vertebral arteries unite with the anastomotic branches from the occipital arteries which have entered via the hypoglossal foramina, to constitute the basio-occipital arterial plexus which passes forward to unite with the rete caroticus (pl. 2, fig. 8). It is noticeable that in the ox the vertebrals make only insignificant connections with the basilar artery by way of the ventral spinal artery. The relative diameters of the carotid and vertebral arteries in calves are given in table 1.

The Circle of Willis After piercing the dura, the internal carotid arteries divide into anterior and posterior branches which form the well-developed Circle of Willis and this gives off three main branches, the anterior cerebral, the middle cerebral and the posterior cerebral arteries (pl. 3 fig. 10). Numerous small thalamic arteries are also given off by the posterior communicating arteries. The Circle of Willis is completed rostrally by the small anterior communicating artery (pl. 2, fig. 7) and posteriorly by the much larger posterior communicating arteries. In one specimen (a calf a few weeks old) it was possible to demonstrate that the anterior extension of the carotid rete communicated with the Circle of Willis by means of two small branches which pierced the dura and joined the Circle of Willis near the origin of the anterior cerebral arteries.

In the ox the basilar artery can be regarded as a branch of the Circle of Willis. This is in contrast to many other species where it is formed by the confluence of the vertebral arteries and passes forward to join the posterior communicating arteries. In the ox the basilar artery tapers caudally and the disposition of the acute angles

a much more complex structure than in the sheep.

In the sheep as in the ox, the internal carotid artery is not important in supplying blood to the rete, for usually it is impossible to demonstrate the artery in animals older than nine months although the distal portion between the rete and the Circle of Willis remains well developed and patent at all ages.

Daniel et al. ('53) claim that the sheep does not possess an internal carotid artery except for the distal portion between the carotid rete and the Circle of Willis. They describe a vessel which they term the ascending pharyngeal artery arising from the occipital artery. They were only able to demonstrate this vessel in the near term fetus. From their account and illustrations, however it is likely that this is a misnomer for the internal carotid as described in this study. The fact that the course of the vessel described by Daniel et al. ('53) can be traced through the carotid rete as one can trace the internal carotid artery in the calf supports the interpretation that this vessel in the sheep is in fact the internal carotid. In the carotid rete of the pig it has been possible to demonstrate that the ascending pharyngeal artery which is well-developed in the species, does continue through the rete to join the Circle of Willis.

The sheep possesses a well-developed occipito-vertebral anastomosis in the form of a loop. The observation made by Canova ('09) that an arterial branch from the occipital enters the foramen in the lower border of the wing of the atlas vertebra and unites with the vertebral, has been confirmed.

The latex preparations have confirmed the observation by Daniel et al. ('53) that the basilar artery tapers caudally in the sheep. This is also so in the ox, so that in both species the basilar is reduced to the status of a posteriorly directed branch of the Circle of Willis with only tenuous connections with the vertebral arteries through the ventral spinal artery.

In the sheep the vertebral arteries, close to their origin, are much smaller than those of the ox, in comparison with the common carotid arteries. In the sheep the vertebrals take no part in the supply of

blood to the carotid rete. By way of the minor connecting branches with the small ventral spinal artery vertebral blood may pass to the spinal cord, which is the case in the goat (Andersson and Jewell, '56). Well developed side to side anastomoses between the vessels supplying both sides of the head and brain exist in the sheep, principally in the posterior communicating arteries of the Circle but also in the rete by means of a few connecting strands. Another side to side anastomosis is provided by the anastomosing vessels between the vertebral arteries.

As in the ox, the main connection between the intra-dural vessels of the Circle of Willis and extra-dura blood vessels of the rete caroticus is provided by the persistent distal portion of the internal carotid artery.

The great difference between the cerebral circulation in the ox and sheep is the presence in the ox of a well-developed basioccipital plexus which permits a direct communication of the vertebrals with the carotid rete and thence to the Circle of Willis. In the sheep vertebral blood has no direct access to the rete and is restricted to the cervical spinal cord and possibly to the posterior medulla oblongata.

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Abbreviations

A Arteria anastomotica	M.C., Middle cerebral artery
A.C., Anterior cerebral artery	O Occipital Artery
A.Com., Anterior communicating artery	O.F Optic foramina
B, Basilar artery	P.C., Posterior cerebral artery
B.O., Basal-occipital arterial plexus	P.C.L., Processus Clinoides
C.C., Common Carotid Artery	P.Com., Posterior communicating artery
C.R. Carotid Rete	R.A., Ramus Anastomoticus
C.O.W Circle of Willis	V Vertebral Artery
E.C., External Carotid Artery	V.S Ventral Spinal Artery
I.C., Internal Carotid Artery	V.Ext., Anterior V-shaped Extension of the Carotid Rete
I.M., Internal Maxillary Artery	
I.D Inferior dental artery	

PLATE 1

EXPLANATION OF FIGURES

- 1 Sheep. Dorsal view of latex cast showing the disposition of the arteries concerned in the cerebral blood supply. The Circle of Willis has been removed. (Approx. $\times \frac{1}{4}$)
- 2 Ox. Dorsal view of latex cast showing the disposition of the arteries concerned in the cerebral blood supply. The Circle of Willis has been removed. (Approx. $\times \frac{1}{2}$)
- 3 Sheep. Dorsal view of latex cast of the carotid rete (etc). The basio-occipital bone has been removed. (Approx. $\times 2\frac{1}{2}$)
- 4 Ox. Dorsal view of latex of the carotid rete (etc). The basio-occipital bone has been removed. (Approx. $\times 2\frac{1}{2}$)

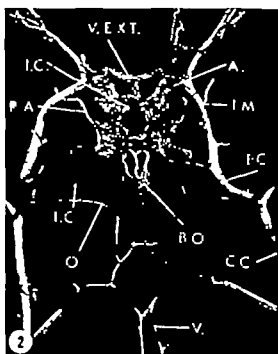
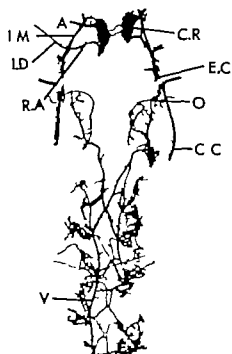
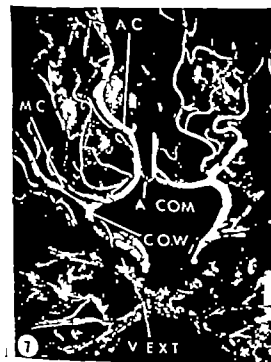


PLATE 2

EXPLANATION OF FIGURES

- 5 Ox. Ventro-lateral view of cast showing the arteries which enter the cranial cavity. The arteria anastomotica enter via the foramen orbito-rotundum. The ramus anastomoticus enters via the foramen orale and the occipital artery enters via the hypoglossal foramen (metric scale)
- 6 Sheep. Ventral view of cast showing the arteries which enter the cranial cavity. The arteria anastomotica enter via the foramen orbito-rotundum. The ramus anastomoticus enters via the foramen orale. The occipital artery enters via the hypoglossal foramen and large branch passes to the alar foramen in the wing of the skull (metric scale)
- 7 Ox. Latex cast of the Circle of Willis displaying the anterior communicating artery. The anterior V shaped extension of the carotid rete is also shown. (Approx. $\times 2$)
- 8 Ox. Latex cast showing the basio-occipital plexus *in situ*. The occipital artery is shown entering the cranial cavity via the hypoglossal foramen. (Approx. $\times 3$)



Articular Remodeling in the Adult Human Temporomandibular Joint¹

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ABSTRACT Articular cartilage can proliferate sufficiently to alter the contours of joints, allowing them to adapt morphologically to various mechanical stresses. This remodeling has been classified into three types based on histologic criteria which were then applied to the temporomandibular joint. This joint has fibrous type of articular tissue which is converted postnatally into fibrocartilage in the loaded areas. The thickness and cell population of this tissue and the amount of internal reconstruction in the subchondral bone vary from one part of the joint to another. These changes appear related to the distribution of mechanical stresses in the joint. Conclusions drawn are: The temporomandibular joint shows the following remodeling trends: progressive remodeling on the anterior part of the condyle, medial part of the tubercle, and roof of the mandibular fossa; regressive remodeling on the posterior part of the condyle and on the lateral part of the tubercle. A perforation in the disc causes progressive remodeling on the condyle and regressive remodeling on the tubercle at the perforation site. Articular remodeling merges gradually into osteoarthritis as the articular tissue breaks down. The net effect of remodeling that has become uncompensated or pathologic is: condyle flattened and enlarged, tubercle resorbed, disc perforated, and articular surfaces uneven. If the dentition is not restored or replaced, high rate of temporomandibular remodeling occurs which will probably continue into osteoarthritis.

Joints have long been regarded as unchanging structures which maintain the same articular structure and cell population throughout adult life. A growing body of data indicates, however, that articular cartilages continue to proliferate after growth ceases and that they modify their shape throughout the entire lifetime of the individual. Johnson ('59) reviewed the evidence for this opinion and pointed out that the boundary between normal age changes and degenerative joint disease is difficult to define.

If such modifications of structure and contour occur in the temporomandibular joint, they would have a bearing on the clinical management of many problems involving this joint and the dentition. This paper will describe the evidence for articular remodeling of the temporomandibular joint.

The earliest presentation of the concept of articular remodeling is that of Ogston (1875-1878). He described and illustrated in articular cartilage the presence of

1. A zone of central growth located just superficial to the midpoint in thick-

ness of the articular cartilage and consisting of cellular proliferation as shown by clones of new cartilage cells.

2. The lining up of these cartilage cells into cell columns just above the subchondral plate where they duplicate the pattern and behavior of an epiphyseal growth plate by adding to the subchondral bone.

3. The removal of disintegrating cells and cartilage from the superficial surface by means of articular movement with replacement of this tissue occurring by growth upward from the zone of central growth.

Ogston believed that cartilage continually renews itself from the zone of central growth and that it grows in two directions — towards the subchondral plate and towards the articular surface. His studies

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of pathologic joints confirmed and reinforced his findings in normal joints. The investigation by Mankin ('62) in which tritiated thymidine was injected into rabbit knee joints supports Ogston's interpretations on the presence of a proliferating zone in articular cartilage.

Detailed studies have been made on similar changes occurring in the pubic symphysis. Putschar ('31) observed that the articular tissue of the pubic symphysis proliferates excessively with each pregnancy and that the excess material is shed into the joint space at the end of pregnancy. Todd ('20 '21) has described in detail the changes which occur in the subchondral bone of the pubic symphysis in both males and females. These changes are so regular they can be used by anthropologists as an indication of the individual's age between 18 and 50 years.

Articular remodeling in human joints has been classified by Johnson ('62) into three categories: progressive, regressive, and circumferential. Progressive remodeling results from excessive proliferation and deposition of new cartilage with subsequent conversion to subchondral bone at a rate sufficient to add length to the end of the bone. The process is recognized by the presence of remnants of the older articular cartilage and subchondral plate in the space beneath the new joint. During the remodeling process thickening of the cartilage, excessive numbers and hypertrophy of cartilage cells, and foci of ossification in the basal zone of calcified cartilage are seen.

Regressive remodeling results in a shortening of the length of the bone and is recognized by the presence of remnants of calcified cartilage in the upper layers of the intact articular cartilage. During the remodeling, the subchondral plate is resorbed by osteoclasts; the resulting cavities become filled in with connective tissue and this connective tissue then becomes chondrified. The increased thickness of the articular cartilage due to such retrograde extension is brought into balance by excessive loss of cartilage through wear at its free surface.

Circumferential or peripheral remodeling results in an increased diameter of the chondro-osseous junction. It takes place at

the margin of the articular cartilage through a combination of progressive remodeling, periosteal elevation, and metaplastic chondrification followed by ossification of the capsular ligamentous and tendinous attachments.

Knowledge of the principles of articular remodeling provides a basis for deducing from histologic sections obtained at death the remodeling changes which have occurred and still are occurring in human temporomandibular joints. The calcified articular cartilage serves as a natural marker for determining the direction in which the remodeling is occurring and for measuring the amount of remodeling which has already taken place.

MATERIALS AND METHODS

One temporomandibular joint was obtained from each of 34 anatomy cadavers at the University of Alabama Medical Center. All of these were unclaimed bodies; 26 of them coming from the state mental hospitals. Two bodies were Caucasian; the remainder were Negroes. The age range extended from 45 to 81 years and the series included approximately equal numbers of males and females (table 1). All observations will be in reference to the specimens in this age group unless specifically stated otherwise. The authors gratefully acknowledge the cooperation of the dental students at the University of Alabama who made these specimens available for study.

The specimens were fixed *in situ* by a routine embalming procedure used to prepare cadavers for dissection. Radiograms were made of both joints in each cadaver and any joint that appeared unusual radiographically was included in those selected for study. The majority of the joints were radiographically normal. After the joint had been removed as a block, it was x-rayed again in order to determine the plane for histologic sectioning, which was either frontal or sagittal. The specimens were then cut on a band saw into slabs approximately 5 mm thick and these slabs were x-rayed. Several slabs from each joint were embedded in paraffin (some in cedar-wood) sectioned and stained with hematoxylin and eosin. The sections were then

studied and analyzed for the type degree and location of articular remodeling. Acknowledgment is made to the Armed Forces Institute of Pathology for the generous technical assistance they provided in histologic processing and photography.

The terminology of the *Nomina Anatomica* is used for the gross features of the joint (fig 1). Thus the temporal surface of the joint is subdivided antero-posteriorly into the articular tubercle (articular eminence) and the articular surface of the mandibular fossa (that part of the fossa enclosed by the joint capsule). The contour of the articular tubercle is subdivided into a crest (the most inferiorly projecting point in its curvature) an anterior slope leading from the crest towards the most

anterior attachment of the joint capsule on the temporal bone, and a slope which merges gradually into the mandibular fossa. The extraarticular surface of the mandibular fossa is that part which lies posterior to the petrotympanic fissure. It consists of the tympanic portion of the temporal bone and is referred to here as the tympanic plate.

The term articular tissue is used in reference to what would ordinarily be the articular cartilage in other synovial joints. Certain parts of this tissue can be identified histologically as nonweight-bearing or nonloaded areas just as there are occlusal and nonocclusal surfaces on teeth. They will be referred to as the nonarticulating areas of the joint.

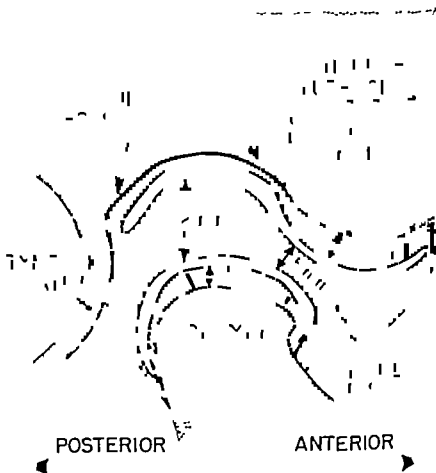


Fig. 1 Diagrammatic sagittal section of temporomandibular joint. The thicknesses of the articular tissue represent measurements obtained from histologic sections and are less than those found in unfixed fresh specimens.

OBSERVATIONS

Articular tissue

There is no hyaline articular cartilage present in this joint. The articular surfaces of the mandibular condyle and temporal bone consist only of fibrous connective tissue at birth which undergoes a varying degree of metaplastic conversion to fibrocartilage during postnatal life. In all specimens the deepest part of the articular tissue is calcified at the junction with the underlying bone.

The ratio of chondrocytes to fibrocytes and the total number of cells present in the articular tissue vary in different specimens and in different areas of the same specimen. This cellular pattern shows no relationship with age and appears to depend largely on the mechanical factors associated with function.

Bundles of collagen fibers travel parallel to the joint surface and interlace with each other in this plane. The deepest fibers extend into the subchondral bone. This basic pattern is maintained even when the fibrous tissue undergoes a conversion to fibrocartilage.

The histologic characteristics of this articular tissue will be described separately for the condyle, temporal bone, and articular disc. An important point to be made here however is that the thickness of the articular tissue is not constant throughout the joint. Thus the radiographic image, which corresponds to the contours of the subchondral bone does not represent the exact contour of the articular surface.

Condyle

Articular tissue on the condyle is from 0.3 to 0.5 mm thick after the shrinkage due to chemical fixation and histologic processing. The hyaline growth cartilage is no longer present in this age range and there is no trace of its earlier existence between the articular tissue and the bone of the condyle.

The majority of specimens show a transition from fibrous tissue at the articular surface to fibrocartilage in the deeper layers (fig. 3). In some areas fibrocartilage may extend through the full thickness of the articular tissue (fig. 4). Such zones usually show signs of proliferative activity.

Increased thickness of the articular tissue, a greater number of cartilage cells per unit area, often arranged in clones rather than singly and an increased amount of ground substance around the cells.

Cartilage cells generally are limited to the articular tissue on the antero-superior aspect of the condyle, the area which is in contact with the articular tubercle during hinge and sliding movements of the joint. It is here that the tissue reaches its greatest thickness. The remaining tissue on the condylar surface merges imperceptibly with the periosteum of the mandible. At the periphery of the joint cavity and on the posterior aspect of the condyle is a covering of synovial tissue and its associated supply of blood vessels, lymphatics and nerves.

Temporal bone

The thickest layer of articular tissue on the temporal surface of the joint is seen at the articular tubercle (fig. 5). On the crest and the immediately adjacent posterior slope of the tubercle it is approximately 0.75 mm thick. Here as on the opposing surface of the condyle, the cartilage cells are most numerous and in some specimens they are distributed through the full thickness of the tissue. Anterior to the crest the number of cartilage cells decreases. At the junction between the posterior slope of the tubercle and the roof of the mandibular fossa, a marked histologic change occurs. The articular tissue becomes abruptly thinner and appears as a meager layer of fibrous connective tissue containing no cartilage cells. Furthermore the tissue lining the mandibular fossa is often covered with a layer of vascularized and innervated synovial tissue (fig. 6). This region is a nonarticulating part of the joint.

Articular disc

A sagittal section through the middle of the joint generally shows the disc to be thinnest and most compact at a point between the anterior surface of the condyle and the posterior slope of the tubercle. Here the disc is very dense and contains more cartilage cells than in its peripheral portions. The bundles of collagen fibers are all parallel to the surfaces of the disc.

latero-medial contour. Laterally it is predominantly regressive. On the medial side progressive remodeling is most common.

The roof of the mandibular fossa shows in the majority of specimens a slow or merely progressive remodeling. The articular tissue is thin; the subchondral plate presents an even concave contour and the bone contains few osteones and no resorption cavities. This part of the joint seems to have a relatively stable contour. There is nothing to indicate that the thin bone separating the middle cranial fossa and its contents from the mandibular fossa is under mechanical stress or that any regressive remodeling occurs there which might ultimately result in communication between the cranial and articular cavities.

Considering the specimens as a group (table 1) one can make a composite map or diagram showing the major distribution of the types of remodeling activity seen in different parts of the joint (fig. 2). The distribution and frequency of remodeling described in table 1 are only rough approximations because serial sections were not made through the entire joint but were concentrated on any areas which showed radiographic and gross signs of alteration in form. The data indicate however that the distribution of remodeling activity is not haphazard. Its more precise localization requires further study.

The degree of remodeling activity present in a joint shows no correlation with age. The rates and quantity of remodeling are evenly distributed throughout the entire age range studied and appear dependent on factors that must be regarded as functional or mechanical in origin. The striking feature is that all the joints studied showed remodeling activity in some part of the joint.

Remodeling and osteoarthritis

Remodeling activity is greatest in those specimens which also show the gross characteristics of osteoarthritis: loss of the tangential fibers in the articular cartilage fibrillation, fissuring and shedding of the cartilage, and eburnation of the underlying bone (figs. 29-32). Destruction and perforation of the articular disc is commonly seen in osteoarthritic joints but occasionally the perforation is also present

without any change in surface contour on the adjacent parts of the condyle and articular tubercle. In such cases however, one can see remodeling activity occurring beneath the articular surface at the level of the subchondral plate. When present this appears as a progression of subchondral bone on the condyle opposite the perforation (fig. 18) or as a focus of early regression on the tubercle (fig. 22). The breakdown of the disc appears to be a stimulus for subsequent remodeling activity on the condyle and temporal bone at the site of perforation.

The pathologic specimens show the following trends in remodeling activity: the articular surfaces become uneven (figs. 31 and 32); the condyle becomes flattened and enlarged through a combination of progressive and circumferential remodeling, and the tubercle tends to be resorbed by regressive remodeling at the crest. The result of such changes is that the area of articular contact between the condyle and temporal bone is increased and the articular plane becomes more nearly parallel to the Frankfurt plane.

DISCUSSION

Histology

The temporomandibular joint is one of the few synovial joints which does not have articular surfaces composed of hyaline cartilage. As Miles and Dawson (22) point out, this has been attributed to the fact that the temporal and mandibular components of the joint are derived from membrane bone instead of from a cartilaginous model. Actually however the condyle develops a cartilage growth center during fetal life and grows from that center on by endochondral ossification in a manner comparable to that occurring at the epiphyseal growth plates of long bones with the exception that an ossification center which becomes an epiphysis does not appear.

The presence of the fibrous articular tissue in this joint seems related to the fact that the articulating elements develop from a discontinuous blastema in contrast to the continuous blastema which is the embryonic precursor of joints possessing hyaline articular cartilage (Moffett '57). The

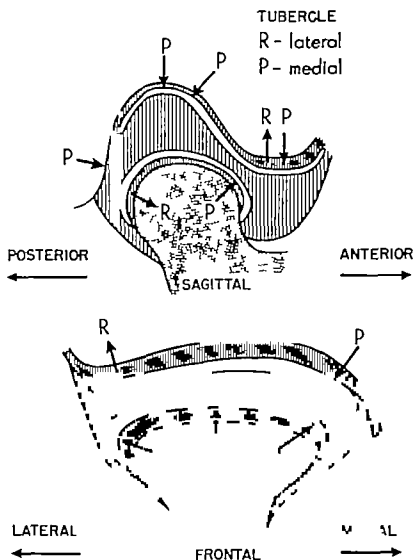


Fig. 2 Composite diagrams to summarize the major trends in distribution of remodeling activity in 30 adult temporomandibular joints. Upper diagram is a sagittal composite. Regressive remodeling (R) occurs predominantly on the lateral part of the articular tubercle and progressive remodeling (P) on the medial part. Lower diagram represents frontal composite through the articular tubercle and the anterior half of the condyle.

significance of this difference is that the embryonic interzone for the temporomandibular joint is mesenchymal and not blastemal. Condensations of this mesenchyme over the articular surfaces during embryonic and fetal life appear to be the precursor of the fibrous articular tissue seen in the fully developed joint. This hypothesis must be tested by studies on the embryology of other synovial joints which do

not have hyaline articular cartilage such as the sternoclavicular joint.

The slow transformation of fibrous articular tissue into fibrocartilage during postnatal life occurs in those parts of the joint which are bearing or loaded surfaces. Much evidence is available to indicate that cartilage can be induced to form in connective tissue at points where there is movement combined with pressure or me-

chanical loading. This is shown in the formation of pseudoarthroses following nonunited fractures as described by Murray ('36). Studies cited by Putschar ('60) illustrate that the collagen/chondroitin sulfate ratio in articular cartilage is correlated with function. For instance Matthews ('52) has shown that the chondroitin sulfate content is higher in weight-bearing joints than in non weight-bearing joints. Similar differences can be demonstrated for the various areas within a joint, the higher values being located in the areas subjected to pressure. This relationship between function and the morphological differentiation of cartilage was demonstrated in another manner by Akeson, Eichelberger and Roma ('57) who reported that after an extremity had been inactivated by denervation, the chondroitin sulfate content of the articular cartilage decreased considerably.

Schallock ('42) has correlated the arrangement of collagen bundles in articular cartilage with the type of stress applied to that area. In areas of sliding contact the fiber bundles cross each other at acute angles causing marked cleavage lines when the cartilage is experimentally punctured. In pressure areas the collagen bundles cross in a rectangular pattern and the cleavage results upon puncturing.

This type of physical differentiation of articular cartilage occurs apparently throughout the individual's lifetime. Makowsky ('49) observed that the differentiation begins at about the third year and continues to a peak at approximately 30 years of age.

Articular remodeling

Against the background of the studies just cited the histologic picture seen in the temporomandibular joint takes on considerable functional significance. The mechanical factors associated with function account for the gradual transformation of the fibrous articular tissue into fibrocartilage during postnatal life. This transformation occurs only in those parts of the joint which are articulating or pressure-bearing areas, namely the anterior aspect of the condyle, the central part of the articular disc, and the posterior slope and crest of the articular tubercle. The

roof of the mandibular fossa does not show this metaplastic transformation nor does the fibrous tissue display any proliferative response in that area. The same functional stimuli which cause this differentiation to occur seem to be responsible for the proliferative response of the articular tissue and underlying bone which expresses itself in a remodeling or reshaping of the articular contours.

Since articular cartilage is avascular, its metabolic needs must be met by diffusion of fluid into the tissue from its surfaces. Although Ekholm ('55) has demonstrated that radioactive tracers diffuse into articular cartilage from its deep surface in the knee joints of young rabbits, a variety of other evidence leads one to conclude that this path does not play a significant role in adults. It appears likely that adult articular tissue is supplied mainly from the synovial fluid on its articular surface. Bywaters ('37) presents some evidence for this view and also attempts to calculate by means of a diffusion constant for glucose the maximum thickness of articular cartilage which could be supplied by diffusion from its surface. His theoretical figure indicates that 3 mm is the critical thickness. This seems to be a reasonable approximation since most articular cartilage is thinner than this. The frequent occurrence of progressive remodeling in areas where the articular cartilage is visibly thickened makes it seem likely that insufficient nutrition induces the changes which follow cartilage proliferation, namely expansion of the calcified zone, vascular invasion from the underlying bone, resorption of the calcified articular tissue, and finally advancement of the subchondral plate toward the articular surface.

It is more difficult to explain completely how the process of regressive remodeling is accomplished. When the subchondral bone is resorbed in regressive remodeling, mesenchyme fills in the resorption cavity and differentiates into articular tissue, thus increasing the thickness of the articular layer by adding to its deep surface. The loss of cartilage on the articular surface which must occur in order to allow a regression of the contour and a reduction of the articular tissue to its usual thick-

ness, cannot be explained by inadequate nutrition. It must be brought about by mechanical factors such as an increased attrition or wear rather than by metabolic factors.

Various types of evidence are available which indicate that joint contours do undergo regressive changes. Lawther (58) compared the x ray contours of temporomandibular joints in two groups of male adults. The individuals who were edentulous for three years or more showed a decrease in slope of the articular tubercle and a decrease in height of the mandibular fossa when compared to similar aged individuals having good dentitions. Unpublished measurements by McCabe and Moffett on archaic Indian skulls show that in temporomandibular joints with clear-cut arthritic changes the posterior slope of the tubercle forms a smaller angle with the Frankfurt plane than that seen on the opposite normal joint in the same specimen or in comparable skulls with both joints normal. The same kind of regressive remodeling can be demonstrated roentgenologically on the articular tubercle if one follows the continuing arthritic changes in a patient.

Some of the relationships between function and articular remodeling in the temporomandibular joint have been demonstrated experimentally by Bretnier (40, 41). He extracted the maxillary molars and premolars in an adult rhesus monkey leaving the anterior teeth in occlusion. After four weeks the posterior wall of the mandibular fossa and the posterior surface of the condyle showed histologic signs of bone resorption. The changes were so extensive they could be recognized grossly.

In another animal he raised the bite in the molar region by means of caps applied to the occlusal surfaces of the teeth. This caused bone formation in the roof of the mandibular fossa and on the posterior surface of the condyle as well as bone resorption on the anterior surface of the condyle. Raising the bite in the incisal region produced the same effect on the joint.

By using intermaxillary rubber bands to pull the mandible anteriorly he induced the following changes in a young monkey: bone formation on the posterior wall of the mandibular fossa and on the posterior

surface of the condyle, as well as bone resorption on the posterior slope of the articular tubercle and on the anterior surface of the condyle.

In another young animal the intermaxillary rubber bands were arranged to pull the mandible posteriorly. This reversed the changes from that seen in the previous animal. The posterior wall of the mandibular fossa and the posterior surface of the condyle showed bone resorption. The anterior surface of the condyle and the posterior slope of the tubercle showed bone formation.

With these experiments Bretnier demonstrated that changes in vertical dimension and in occlusal relationships cause bony changes in and about the temporomandibular joint and in other parts of the mandible. These changes occurred rapidly as early as four weeks, and were essentially the same as those seen in alveolar processes during orthodontic treatment. In these short term experiments he did not mention or illustrate any changes occurring in the articular tissue. One might expect, however, that after the bony changes were stabilized much slower adaptive remodeling would develop in the articular tissue.

For setting the borderline between articular remodeling and degenerative arthritis one criterion seems useful—the integrity of the articular tissue. Remodeling might be defined as the changes associated with a proliferative response in the articular tissue. Osteoarthritis, on the other hand, represents the changes associated with a breakdown of the articular tissue. Fibrillation, fissuring, eburnation and cystic alterations.

Not enough data are available to allow conclusions concerning the dental causes of temporomandibular joint remodeling. The amount of remodeling activity does seem to be correlated, however, with the number of missing teeth. Specimens with osteoarthritic changes are often edentulous. These relationships support the concept that the jaw joint is an articular triad with two points of contact provided by the temporomandibular joints and the third one by the dentition. Alteration in any one of these contact points will produce secondary changes in the other two just as hap-

pens in the articular triad between vertebrae.

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PLATES

Abbreviations

AT, articular tissue	F fibrous tissue
B bone	M, mesenchyme
C, fibrocartilage	P progressive remodeling
CC, calcified cartilage	R, regressive remodeling
CO condyle	SP subchondral plate
CZ, calcified zone	SV synovial villus
D disc	T tubercle

PLATE 1

EXPLANATION OF FIGURES

- 3-4 Articular tissue on mandibular condyle, 74 yr male (spec. no. 88) sagittal section 82 \times . The cell population and thickness of the articular tissue vary in different parts of the joint. Figure 3 Anterior part of condylar surface. A thin zone of calcified cartilage occurs at the junction with subchondral bone. Figure 4 Superior part of condyle same specimen and magnification as in figure 3. The articular tissue is thickened, cartilage cells have formed clones and are distributed throughout the full thickness of the tissue.
- 5 Articular tissue on posterior slope of articular tubercle, 45 yr male (spec. no. H2) frontal section, 44 \times . From above downward are shown subchondral bone dark band of calcified cartilage, deep zone of fibrocartilage fibrous tissue on articular surface.
- 6 Articular tissue on roof of mandibular fossa, 74 yr male (spec. no. 88) sagittal section, 164 \times . No cartilage cells are present, the fibrous tissue is very thin and covered by two synovial villi (SV) containing blood vessels. This is histologically nonarticulating part of the joint.
- 7 Vascularized portion of articular disc in the mandibular fossa, 67 yr male (spec. no. 67) sagittal section 36 \times . The area shown is located just posterior to the condyle. The space along the right border is the inferior joint cavity. Histologically this is nonarticulating area in which are found blood vessels nerves, adipose tissue and areolar tissue.
- 8 Temporomandibular joint, 74 yr male (spec. no. 88) sagittal section, 3 \times . The large spaces seen in the bone of the mandibular fossa and articular tubercle are mastoid air cells which sometimes extend into the squamous part of the temporal bone.

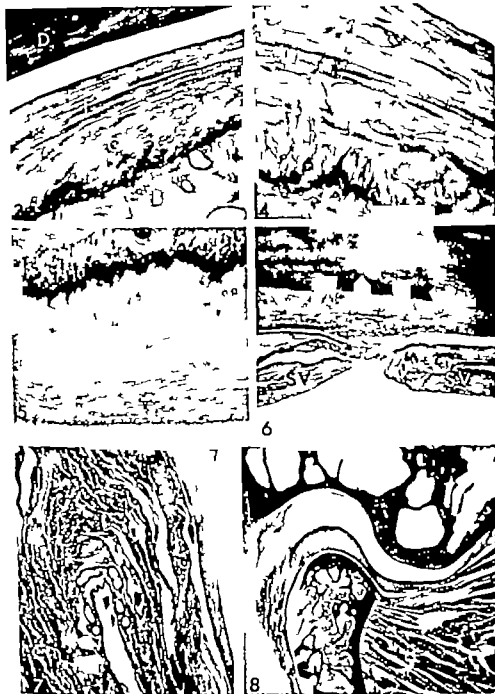


PLATE 2

EXPLANATION OF FIGURES

- 9 Roof of mandibular fossa, 61 yr female (spec. no. L) sagittal section, polarized light, 95 \times . The lamellar arrangement of the bone in this part of the joint indicates that very little internal reconstruction has occurred by means of replacement with osteones. This agrees with other evidence that the roof of the fossa is nonarticulating part of the joint. Compare with figure 10.
- 10 Articular tubercle just posterior to its crest, 64 yr female (spec. no. K), sagittal section, polarized light, 95 \times . The lamellar bone has been replaced by many generations of osteones indicating that this part of the joint is a loaded or articulating area subjected to mechanical stress.
- 11-12 Proliferation of articular tissue on the condyle opposite thinned part of articular disc, 67 yr female (spec. no. M) sagittal section. Figure 11-10 \times . Area enclosed in the rectangle is enlarged in figure 12. Figure 12-53 \times . Articular tissue on condyle is thickened contains more than the usual number of cells per unit area and the calcified zone (CZ) has expanded.
- 13 Expansion of calcified zone into the overlying articular tissue on lateral half of condyle, 61 yr male (spec. no. D-2) frontal section, 25 \times . In this area the calcified zone (CZ) is thicker than the other layers of the articular tissue. Normally it is only thin band.
- 14 Progressive remodeling on the medial part of the articular tubercle 67 yr female (spec. no. 90) sagittal section, 25 \times . The calcified zone has advanced toward the articular surface in the region marked by arrows and subchondral bone is invading the area deep to it.

Benjamin C. Moffett, Jr., Lexi C. Johnson, James B. McCabe and Harold C. Aslaw



PLATE 3

EXPLANATION OF FIGURES

- 15 Progressive remodeling on the lateral part of the condyle, 61 yr male (spec. no. D-3) frontal section, 25 \times . The calcified zone has advanced toward the articular surface in the region marked by arrows and the tissue deep to it is being replaced with bone.
- 16 Progressive remodeling, lateral part of condyle 64 yr male (spec. no. 93) frontal section 7.5 \times . Arrows indicate a cumulative series of stages in the advancement of the calcified zone. An associated proliferation of articular tissue in this area has prevented the calcified tissue from reaching the joint cavity and in this manner the articular contour of the condyle has been altered.
- 17 Progressive remodeling, medial part of tubercle 55 yr male (spec. no. 98) sagittal section, 27 \times . The articular cavity appears in the lower left hand corner. Running diagonally across the center of the photograph from upper left to lower right is an unresorbed band of calcified cartilage (CC) which marks the original location of the subchondral plate prior to remodeling. All of the bone seen on the lower side (articular side) of this calcified cartilage represents bone formed as result of progressive remodeling. The new subchondral plate (SP) and calcified zone (CZ) have advanced toward the articular surface for a distance of more than 1 mm.
- 18 Condyle and articular disc 63 yr male (spec. unnumbered) sagittal section, 3.5 \times . Opposite perforation in the articular disc (D) is a localized area of early progressive remodeling (bounded by arrows) on the condyle. The subchondral bone has advanced in this area even though change in contour has not yet occurred on the articular surface.
- 19 Junction between subchondral bone (SB) and articular tissue (AT), lateral part of articular tubercle, 45 yr male (spec. no. 92) sagittal section 36 \times . This is the first stage in regressive remodeling. A small localized area of bone resorption is seen immediately beneath the articular tissue. The dark spots on the margins of resorption cavities are osteoclasts.
- 20 Regressive remodeling, lateral part of articular tubercle embalmed at very age unknown sagittal section, 7.5 \times . The resorption defect (outlined by arrows) in the subchondral bone represents an early stage in regressive remodeling. It is located just posterior to the crest of the tubercle in a loaded region where the disc (D) has become thinned almost to perforation.

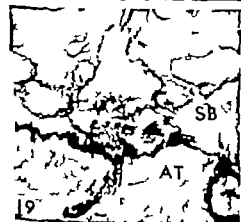
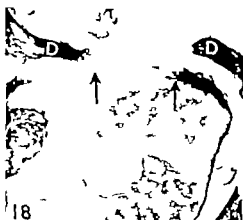
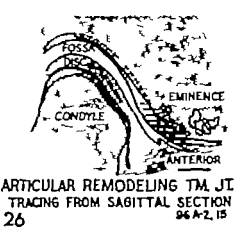
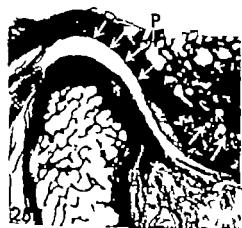


PLATE 4

EXPLANATION OF FIGURES

- 21 Closer view of the resorption area shown in figure 20, 33 \times . As the resorption cavity enlarges it becomes filled with undifferentiated mesenchyme (M). This eventually differentiates into articular tissue.
- 22 Regressive remodeling, lateral part of articular tubercle 79 yr male (spec. no. P) sagittal section, 25 \times . A deep and sharply bounded area of resorption (outlined by arrows) has occurred in the subchondral bone near the crest of the tubercle at point directly opposite the edge of perforation in the disc (D). It has been filled in with a fibrous tissue that is continuous with the articular layer.
- 23 Extensive regressive remodeling of crest of articular tubercle, 55 yr male (spec. no. 96) sagittal section 3 \times . The contour of the subchondral bone on the tubercle (T) has been flattened by bone resorption at the crest. The dark wavy line enclosed in the rectangle (enlarged in fig. 24) is remnant of the old calcified zone and represents the former location of the subchondral plate.
- 24 Close up view of area enclosed by rectangle in figure 23 26 \times . The dark band marked by arrows is remnant of the old calcified zone. It is located at the former level of the subchondral plate prior to resorption of the underlying bone in regressive remodeling. All of the fibrocartilage lying above this band represents newly differentiated articular tissue which fills in the area where bone has been resorbed on the tubercle.
- 25 Temporomandibular joint, 55 yr male (spec. no. 96) sagittal section, 2.2 \times . Examination of the microscopic section under high power reveals progressive remodeling (P) on the posterior slope of the tubercle and on the roof of the mandibular fossa. Regressive remodeling (R) is occurring on the crest of the tubercle. Compare with figure 26.
- 26 Tracing of the section shown in figure 25. The dotted line on the temporal part of the joint represents the contour of the subchondral plate prior to remodeling as determined from unresorbed remnants of the calcified zone. The new contour shown in continuous line at the junction between bone (stippled) and articular tissue (horizontal stripe) is hanging toward flatter less steep articular tubercle.

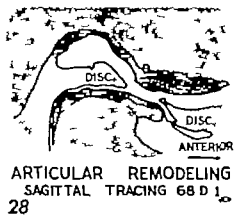


ARTICULAR REMODELING TM JT
TRACING FROM SAGITTAL SECTION
96 A-2, 15

PLATE 5

EXPLANATION OF FIGURES

- 27 Temporomandibular joint with perforated disc, 81 yr male (spec. no. 68) sagittal section, $2.2\times$. This joint is well within the category of osteoarthritis but its remodeling changes differ only in degree from those seen in figure 25. Observe that the severest changes occur opposite the perforation in the disc: progressive and circumferential remodeling on the anterior part of the condyle, regressive remodeling on the crest of the tubercle. Compare with figure 25.
- 28 Tracing of the section shown in figure 27. The dotted lines on the condyle and temporal bone represent the contours of their subchondral plates prior to remodeling. The new contours at the junction between bone (stippled) and articular tissue (horizontal stripe) result in a flattened, enlarged condyle and a partially resorbed articular tubercle.
- 29 Posterior slope of tubercle, adjacent to crest, 67 yr female (spec. no. 90) sagittal section, $2.5\times$. Changes in articular tissue associated with osteoarthritis: fissuring, fibrillation, and loss of the superficial, tangential fibers. The contour of the subchondral plate in this region has also become irregular and ragged through disorganized type of remodeling activity that appears to be progressive in one place and regressive in the next.
- 30 Upper posterior slope of articular tubercle, 67 yr female (spec. no. 90) sagittal section, $9\times$. Advanced changes in articular tissue associated with osteoarthritis. The articular tissue on this part of the tubercle (T) shows extreme fibrillation and shedding right down to the calcified zone in one area. This spot would shortly become eburnated bone. The convex curvature of the subchondral plate in this region is the result of progressive remodeling. The disc has become perforated allowing the condyle (CO) to come into direct contact with the tubercle.
- 31 Temporomandibular joint, age unknown, male (spec. no. 69) sagittal section $3\times$. Disorganized type of remodeling associated with osteoarthritis. The condyle presents irregularities on its articular surface resulting from circumferential progressive, and regressive remodeling all occurring in adjacent areas. The disc (D) has disintegrated over most of the condyle.
- 32 Temporomandibular joint, age unknown, male (spec. no. 91) frontal section, $3\times$. Extreme irregularity of contour at anterior margin of condyle (CO). The shredded appearance of the articular tissue on the lateral (left) part of the condyle and an irregular osteophyte (circumferential remodeling) on the medial aspect label this joint as osteoarthritic.



ARTICULAR REMODELING
SAGITTAL TRACING 68 D 1



Ultrastructure of Bovine Spermatozoa

I. THE HEAD OF NORMAL, EJACULATED SPERM^{1,2,3}

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ABSTRACT The ultrastructure of the normal bovine sperm head has been studied and particular attention has been given to the morphology and coverings of the nucleus and the formation of the equatorial segment.

The bovine sperm head consists of homogeneous, flattened nucleus which is covered anteriorly by three-layered head cap and posteriorly by a loose thin, dense, post-nuclear cap. The nucleus measures approximately 0.3 to 0.5 μ in thickness. It tapers anteriorly to sharp point along the frontal portion of the head and thickens posteriorly to accommodate an implantation socket for the tail. The nuclear membrane is double and porous. Vacuoles or openings of variable size and shape are present in the nucleoplasm, predominantly in the posterior portion of the nucleus. The head cap measures approximately 350 to 500 \AA in thickness. It consists of dense inner and outer membranes which envelop moderately electron dense middle layer. The head cap thickens across the frontal part of the head forming ridge on one side of the nucleus.

A sequence of structural alterations in the head cap provide evidence for the presence of the equatorial segment. The anterior portion of the head cap swells and deteriorates leaving the posterior portion intact as band about the center of the nucleus. This band represents the equatorial segment.

The literature on the ultrastructure of mammalian spermatozoa is voluminous and recent comprehensive reviews have been published by Anberg ('57) and Fawcett ('58). Of prime concern to the cellular physiologist is the integration of information on cellular metabolism, behavior and structure. Since the metabolism of bovine spermatozoa has been studied intensively and accurate information on fertility of individual bovine males is available through artificial breeding records it seemed advisable to define more clearly bovine sperm ultrastructure. Lack of information on normal head ultrastructure is particularly evident.

Most current knowledge of the bovine sperm head ultrastructure stems from the efforts of early workers studying whole cells (Baylor et al. 43 Bretschneider 48 49 Reed and Reed, 48) or partially disrupted cells (Wu and McKenzie, '55 Yasuzumi et al. '58) with the electron microscope. More recent studies involving thin-sectioning techniques with electron microscopy have revealed additional detail, particularly with respect to nuclear morphology and the relationship of the nuclear coverings (Bradfield '54; Blom and Birch-

Andersen, '61; Rahlman, '61) Nevertheless, considerable disagreement still exists.

Confusion resides primarily in the characteristics and relationships of the nuclear coverings. Interpretations have been confounded by attempts to explain capacitation as well as the occurrence of the equatorial segment, a band readily observed across the center of the flat side of the fixed and/or stained head when examined under the light microscope.

Therefore the present investigation was undertaken to define further the ultrastructure of the normal bovine sperm head.

MATERIALS AND METHODS

Semen was collected by means of the artificial vagina from Holstein bulls. Ejaculates used had at least a volume of 3 ml, an initial motility of 60% and a sperm concentration of $700 \times 10^6/\text{ml}$.

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The influence of any one bull was reduced by pooling single ejaculates collected from five different bulls. Semen was diluted either with previously heated skim-milk or a 2.9% solution of sodium citrate dihydrate.

Spermatozoa were centrifuged from the diluent at 4 C for 30 minutes at 750 g. Centrifugation was carried out at 4 C instead of room temperature to reduce the resistance offered by motile sperm and to obtain a more equal distribution of motile and non-motile sperm in the pellet. The supernatant was decanted and the loose pellet of spermatozoa was transferred in pieces (approximately 3 mm) to a petri dish containing semisolid 2.5% agar at 29 C. The agar was permitted to solidify at room temperature following transfer.

The use of agar as suggested by Blom and Birch-Andersen ('60) served to maintain the integrity of the loose pellets during fixation and the early stages of dehydration. The tissue then became sufficiently hard and the agar was no longer needed.

Pellets from each pooled sample were divided into two portions. One portion was fixed in 1% osmium tetroxide buffered with veronal-acetate (Palade, '52) containing sucrose (Caulfield '57) and the other

in potassium permanganate fixative (Luft, '59). Both fixatives were buffered at pH 7.2 to 7.4. Tissues were dehydrated in a graded series of ethanol baths and embedded in Araldite. Sections were cut with glass knives using a Porter Blum ultramicrotome and electron micrographs were made with an RCA EMU 2D electron microscope.

OBSERVATIONS AND DISCUSSION

Most measurements and descriptions of the bovine sperm head have been limited to the broad, flat side of the head. From this aspect, the approximate head measurement averages are: length 9.0 μ , greatest width 4.5 μ and base width 1.7 μ . These values are based on measurements obtained by several investigators (Savage et al. '27; Bretschneider '48; Bonadonna et al. '59; Mukherjee and Dott, '60; Blom and Birch-Andersen, '61). Only when the cell is free floating, motile or fixed and sectioned is the thinner aspect apparent. A near-median sagittal section through the

thin dimension of the head (fig. 2A) shows the relationship of its various components. In general these relationships are in close agreement with those observed by Blom and Birch-Andersen ('61). For comparison to the sagittal section, cross sections of the head positioned in the region in which each is believed to have originated, are presented in figs. 2B, C, D and E.

The anterior 55 to 60% of the nucleus is tightly covered by a thick capsule, the head cap; the posterior 40 to 45% is covered loosely by a thin sheath, the post-nuclear cap. The cell membrane, which surrounds the entire cell, loosely envelops the head with the exception of an attachment along the base of the head (fig. 4).

A three-dimensional graphic illustration of the bovine sperm head is presented in figure 1. This illustration is based on information obtained from the present study as well as from previous studies (Bradfield, '54; Blom and Birch-Andersen, '60; Rahman, '61).

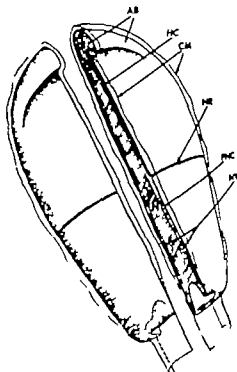


Fig. 1. Graphic illustration summarizing the ultrastructural features of the bovine sperm head. Apical body (AB); head cap (HC); cell membrane (CM); nuclear ring (NR); nucleus (N); post-nuclear cap (PNC); nuclear vacuole (NV).

The nucleus

The nucleus exhibits rather uniform thickness of from 0.2 to 0.3 μ . However there is a gentle taper of the anterior portion to a point along the frontal part of the head (fig. 2A and B) and a thickening near the base (fig. 2A and E). The thickening is especially apparent near the median line of the nucleus (fig. 2E) thereby providing a recess for the insertion of the tail. Blom and Birch-Andersen ('60) have described the attachment of the tail to the head as resembling a capitulum in a socket. The socket, however, is not a complete one. It may be observed in sagittal sections through the neck cut on a plane parallel with the flat side of the head (arrow fig. 3) but not in sagittal sections cut at 90° to the flat plane of the head (fig. 4). The latter section reveals only the insertion of the tail into a concave recess at the base of the head. This relationship is shown in figure 1.

A basal plate distinctly separate from the nucleus but lining the implantation recess formed by the nucleus was reported by Nicander and Bane ('62) studying porcine spermatozoa. The same type of structure was observed in bovine sperm (fig. 8). The basal plate was not observed in all sections through the head base suggesting that it may not line the entire recess. Therefore this structure was omitted from figure 1 to avoid confusion.

The osmium- or permanganate-fixed and sectioned nucleus appears nearly homogeneous except for the presence of vacuoles (figs. 5, 6, 7, 8). The term vacuoles is used here to include non-electron or low electron dense areas thus recognizing that they may be artifacts. Vacuoles were found throughout the nucleus however they were most numerous posteriorly. In some instances they were observed as openings on the nuclear surface (fig. 6). Schnall ('62) reported a similar observation with human sperm. He postulated that such vacuoles may provide a means for eliminating gaseous metabolic waste from the nucleus. They also may represent a means by which the nucleoplasm protects itself against external osmotic gradients — forming and releasing vacuoles as the osmotic environment changes. Evidence for either hypothesis is still lacking. On the other

hand, these structures may be deformities on the nuclear surface rather than vacuoles.

The two round vacuoles shown in figure 5 correspond to a series of four vacuoles along the same axis as reported by Blom and Birch-Andersen ('60). Their function is not known but their location suggests that they may be associated with the articulation mechanism.

The irregularity of number, shape and orientation of vacuoles shown in figures 7 and 8 indicates that they may be artifacts. Fawcett ('58) has suggested that nuclear vacuoles may arise from accidents in chromatin condensation during spermiogenesis. Such an explanation could apply to these vacuoles since they were most frequently observed in the posterior region of the nucleus where the greatest chromatin concentration occurs in the bovine sperm head (Salisbury et al., '61).

The nucleus is covered by a porous double nuclear membrane (fig. 10). The inner and outer layers appear to be continuous with one another at the pores. In many sections a thick, intermittent nuclear cover was observed outside of the nuclear membrane and under the loose post nuclear cap (fig. 14). Further characterization of this cover could not be resolved. Nicander and Bane ('62) observed a similar semi-electron dense layer under the region which they designated as the equatorial segment in boar spermatozoa.

The head cap

The head cap can be divided into three major layers: an inner membrane, an outer membrane and a homogeneous moderately electron-dense middle layer (fig. 11). The inner and outer membranes are continuous with one another at the posterior margin of the head cap so that the homogeneous material between them is completely enveloped by a single membrane (fig. 14). This general description agrees with previous interpretations of the head cap of cat spermatozoa by Burgos and Fawcett ('53) of human spermatozoa by Fawcett and Burgos ('56) and by Anberg ('57) and of epididymal porcine sperm by Nicander and Bane ('62). The inner and outer membranes of the head cap represent the wall of the acrosomic vesicle found during

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PLATES

PLATE 1

EXPLANATION OF FIGURES

- 2 Osmium-stained sections of the head oriented on basis of probable origin. $\times 20,200$
- A Near median sagittal section showing location of the apical body (AB) head cap (HC) nuclear ring (NR) post-nuclear cap (PNC) nucleus (N) and cell membrane (CM)
- B Cross section of frontal part of the head showing the lateral extremities of the apical body (AB) and thin nucleus (N) in this region.
- C Cross section in region of the head cap (HC)
- D Cross section in the vicinity of the post-nuclear cap (PNC) The increasing thickness across the nucleus suggests the section should be oriented obliquely. Compare with posterior thickening of the nucleus in sagittal section 2A.
- E Cross section through the base of the head showing the top of the implantation socket (IS) for the tail. The head thickens along the median line at the base to accommodate the socket.

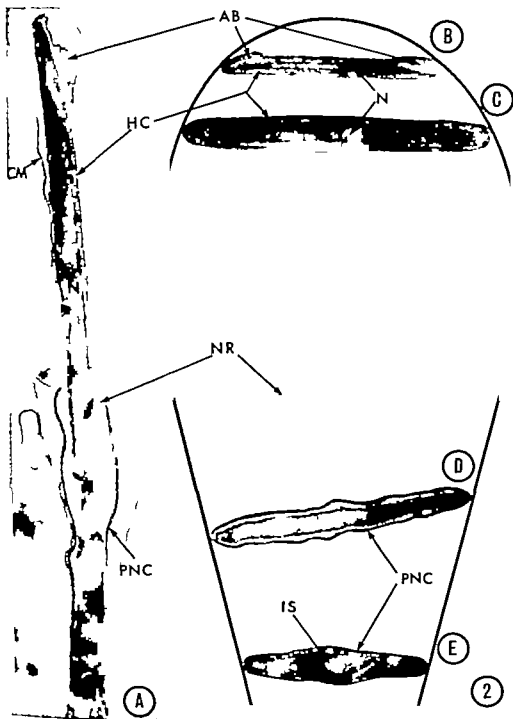


PLATE 2

EXPLANATION OF FIGURES

- 3 Osmium-stained sagittal section through the neck cut on a plane parallel to the flat surface of the head. Left edge of nucleus may be observed forming part of the socket (arrow) for attachment of the tail. $\times 99,700$.
- 4 Osmium-stained sagittal section through the neck cut at 90° to the flat surface of the head. No evidence of socket is present in this type of section. Attachment of the cell membrane along base of head is apparent (arrow). $\times 57,000$.



PLATE 3

EXPLANATION OF FIGURES

Figs. 5 to 8 Nuclear vacuoles (osmium stain)

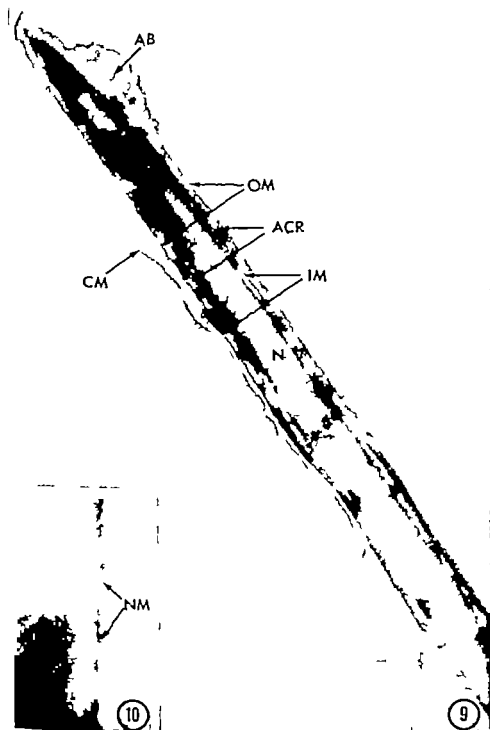
- 5 Two round vacuoles at the base of the head.
- 6 A vacuole opening at the nuclear surface near frontal part of the head.
- 7-8 Irregular vacuoles found predominantly near the base of the nucleus. Figure 8 also shows the basal plate (BP) lining the recess at the base of the head.

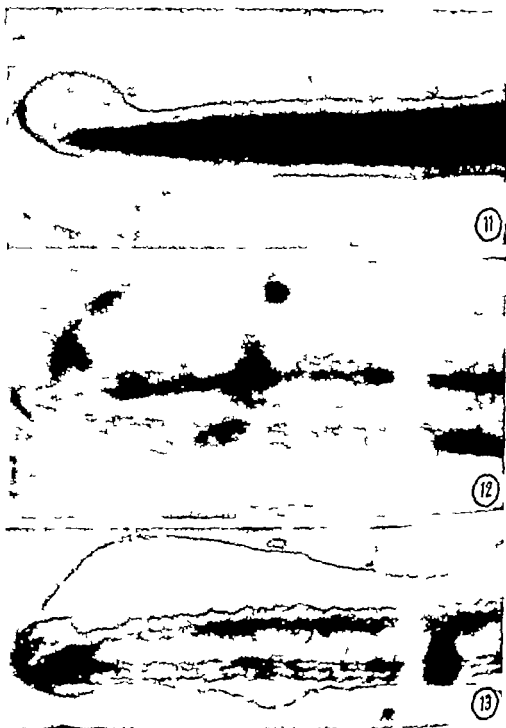


PLATE 4

EXPLANATION OF FIGURES

- 9 Sagittal section (osmium stain) showing components of the head cap. The head cap consists of three distinct layers: thin, electron-dense outer membrane (OM); thick, moderately electron-dense acrosomal layer (ACR); and thin highly electron-dense inner membrane (IM). The apical body (AB) appears as an enlargement of the acrosome on one side of the nucleus. The cell membrane (CM) is the outermost covering. $\times 40,000$.
- 10 High magnification of the nuclear surface (potassium permanganate stain) showing double porous nuclear membrane (NM) $\times 60,000$.

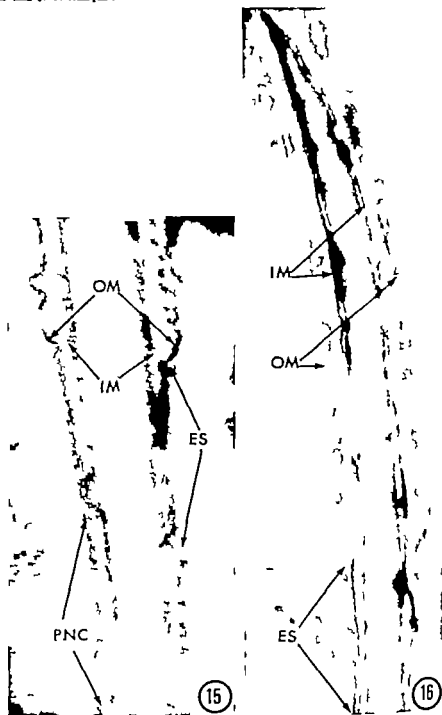




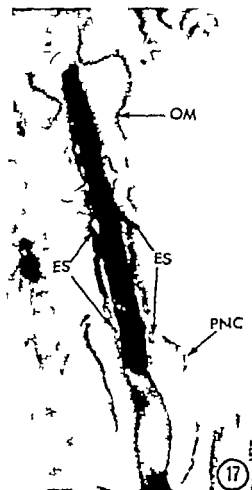
11 13 Osmium-stained sagittal sections through the frontal part of the head showing variation in the appearance of the apical body. The more developed apical body in figure 13 is believed to have originated nearer the pex of the head. $\times 42,000$



- 14 Near-medial sagittal section (osmium-stain) through the posterior region of the head. In addition to the cell membrane (CM) in this region the nucleus is covered by the loose, electron-dense post-nuclear cap (PNC). A somewhat irregular moderately dense nuclear cover (NC) which could not be further resolved may be observed along the nuclear surface. The posterior margin of the head cap is apparent in the upper right hand corner. The arrow (HC) shows that the inner and outer membrane of the head cap are continuous with one another (this point $\times 33,000$).



- 15 Permanganat stained sagittal section in the region of the equatorial segment (ES) showing initial phase of segment formation. The anterior portion of the head cap is visible as noted by the separation of the inner membrane (IM) and outer membrane (OM). $\times 57,000$
- 16 Osmium-stained sagittal section showing deterioration of the outer membrane (OM) with equatorial segment (ES) still intact. The inner membrane (IM) also retains its identity. $\times 40,000$



- 17 Osmium stained sagittal section showing the equatorial segment (ES) as the intact inner and outer membranes of the posterior portion of the head cap. The anterior portion of the outer membrane (OM) is loose and will probably become detached from the head or deteriorate in place. Posterior to the equatorial segment is the post nuclear cap (PNC) $\times 22,000$.

Ultrastructure of Bovine Spermatozoa

II. THE NECK AND TAIL OF NORMAL EJACULATED SPERM^{1,2,3}

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ABSTRACT The normal bovine sperm tail consists of the classical $9+9+2$ fiber pattern bound anteriorly by the mitochondrial helix and posteriorly by the fibrous helix except for the last 2 to 3 μ .

The outer ring of nine coarse fibers originate as laminated columns, beginning from common base which is located in recess at the base of the head. The fibers taper posteriorly ending at different levels in the principal piece. Evidence is presented for the alternate contraction and expansion of the laminated segments of the coarse fibers in the neck—the probable mechanism for initiating the flagellar wave.

The mitochondrial helix is composed of several mitochondrial strands of different length. Each strand consists of several elongated mitochondria positioned end to end. Apparently the strands of mitochondria may begin or end at various locations along the middle piece. The number of turns in the mitochondrial helix was found to vary from approximately 68 to 75 turns among cells. The helix binds the axial fiber bundle with pitch of 20 to 25 over most of the middle piece. The mitochondria are double-walled and possess internal cristae that are vesicular or tubular in structure.

The fibrous helix consists of dense, circumferential strands of variable thickness and shape with two longitudinal elements on opposite sides of the helix. Both the circumferential strands and the longitudinal elements become thinner as they progress posteriorly.

The tail of mammalian spermatozoa consists of three major regions as seen with the light microscope. Proceeding posteriorly they are the relatively thick middle piece, the thinner long principal piece, and the very thin, short terminal or end piece. The middle piece is joined with the head by a short, delicate segment referred to as the neck or implantation region.

As early as 1888 Ballowitz recognized that the sperm tail was more complex than the preceding description suggests. Using the light microscope he observed occasionally that the tail frayed into a tuft of exceedingly fine fibrils. Later observations on whole and partially disrupted sperm under the electron microscope corroborated the early observations of Ballowitz that the flagellum was composed of several fibers (Baylor et al. '43; Bretschneider 49a, 49b; Reed and Reed, '48; Randall and Friedlaender '50; Schnall, '52; Wu and McKenzie '55; Bonadonna et al. '58). Some of these studies revealed that the tail fibers were bound by a helix. The helical strands appeared thicker in the anterior portion of the flagellum than in

the posterior portion (Bretschneider 49b; Wu and McKenzie, '55). The middle piece was bound by the thicker helix and the principal piece by the thinner helix. The short terminal piece appeared to consist of the tail fibers without a helical cover (Baylor et al. '43). Thus, the three flagellar regions distinguishable with the light microscope were characterized ultrastructurally using the electron microscope.

Confusion concerning the number and arrangement of the flagellar subunits as well as characterization of the helix, prevailed until thin-sectioning techniques were employed with the electron microscope. Subsequently much research has been undertaken to define the ultrastructure of the mammalian sperm tail. Several comprehensive monographs have been published (Anberg, '57; Fawcett, '58, '62).

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Thin-sectioning techniques with electron microscopy have been successfully applied to the bovine sperm tail and neck (Bradfield '54 '55 Blom and Birch-Andersen, '60 Rahlman, '61 Nicander and Bane '62). Nevertheless confusion still resides in the complete characterization of the mitochondrial and fibrous helix as well as the relationship of the flagellar fibers throughout the tail particularly their relation and origin in the neck region where they form the implantation structures. Thus the present study was undertaken to delineate further the ultrastructure of the neck and tail of bovine spermatozoa.

MATERIALS AND METHODS

Semen was collected by means of the artificial vagina from Holstein bulls. Ejaculates used had at least a volume of 3 ml, an initial motility of 60% and a sperm concentration of $700 \times 10^6/\text{ml}$. The influence of any one bull was reduced by pooling single ejaculates collected from five different bulls. Semen was diluted either with previously heated skim milk or a 2.9% solution of sodium citrate dihydrate.

Spermatozoa were centrifuged from the diluent at 4°C for 30 minutes at 750 g. Centrifugation was carried out at 4°C instead of room temperature to reduce the resistance offered by motile sperm and to obtain a more equal distribution of motile and non motile sperm in the pellet. The supernatant was decanted and the loose pellet of spermatozoa was transferred in pieces (approximately 3 mm) to a petri dish containing semisolid 2.5% agar at 20°C. Following transfer the agar was permitted to solidify at room temperature.

The use of agar as suggested by Blom and Birch-Andersen ('60) served to maintain the integrity of the loose pellets during fixation and the early stages of dehydration. The tissue then became sufficiently hard and the agar was no longer needed.

Pellets from each pooled sample were divided into two portions. One portion was fixed in 1% osmium tetroxide buffered with veronal acetate (P. L. de ?) containing sucrose (Caulfield) and the other portion in potassium permanganate fixative (Luft '56). Both fixatives were buffered

at pH 7.2 to 7.4. Tissues were dehydrated in a graded series of ethanol baths and embedded in Araldite. Sections were cut with glass knives using a Porter-Blum ultramicrotome and electron micrographs were made with an RCA EMU-50 electron microscope.

OBSERVATIONS AND DISCUSSION

In contrast to the sperm head, the more widely accepted ultrastructural features of the mammalian sperm tail show considerably less species variation. The present study of the bovine sperm tail indicates that it also conforms quite closely to the general pattern described for other mammalian sperm. Modifications of the stout and flagellar pattern were observed however it was difficult in most cases to ascertain whether any given variation was species-specific or merely unobserved in cells of other species.

Graphic illustrations of various segments of the bovine sperm tail are presented (figs. 1 to 4). These illustrations include information based upon interpretations of observations from the present study as well as those from previous studies of the bovine sperm cell (Baylor et al. '43; Reed and Reed '48 Bretschneider, '49a, b '50 Bradfield, '54 '55 Wu and McKenzie, '55 Blom and Birch-Andersen, '60; Rahlman '61 Nicander and Bane '62a).

The length of the bovine sperm tail and its components are measured most advantageously in whole cell preparations. However the thickness of the tail and its components barring preparational artifact, can be measured from electron micrographs of cross sections or median sagittal sections. Based on such sections, the middle piece was found to possess a relatively uniform diameter of from 0.85μ to 0.72μ . A sharp decrease in flagellar diameter occurs at the junction of the middle piece and principal piece. This is due to termination of the thick mitochondrial helix and the beginning of the thin fibrous helix (fig. 1).

The anterior portion of the principal piece measured approximately 0.50μ in diameter and tapered posteriorly to approximately 0.25μ near the terminal piece.

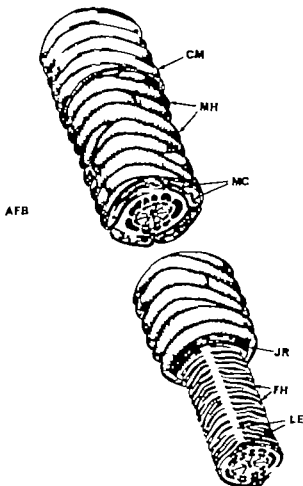


Fig. 1 Graphical illustration summarizing ultrastructural features of the middle piece and anterior portion of the principal piece. The cell membrane has been partially removed and the flagellum cut to show internal structure. Cell membrane (CM); mitochondrial helix, (MH); mitochondrial cristae, (MC); Jensen ring, (JR); fibrous helix, (FH); longitudinal element, (LE); axial fiber bundle, (AFB) consisting of the nine outer coarse fibers, the nine inner fibers or doublets and the central pair of fibers.

The axial fiber bundle

In the middle piece and anterior portion of the principal piece the axial fiber bundle (all fibers of tail) was found to consist of twenty fibers arranged concentrically in two rows of nine each around a central pair (figs. 1 8 and 9). This arrangement, known as the $9 + 9 + 2$ fiber pattern, has been described previously in spermatozoa of the bull (Bradfield '55 Blom and Birch Andersen, '60 Rahlman '61) as well as other mammals (Bradfield '54 '55 Fawcett, '58 Anberg '57 Telkka et al '61). The inner ring of nine fibers or doublets

(double fibers) plus the central pair collectively known as the axial filament complex or $9 + 2$ fiber pattern, were found in the middle piece principal piece and terminal piece. This complex is a truly classical arrangement in that it has been observed in many other flagella and cilia throughout the animal and plant kingdoms. Using a modified method of specimen preparation, Afzelius ('59) has clearly described this complex in the tail of the sea urchin sperm.

Based on the observations in the present study the axial filament complex may be

described as follows: The central pair appears as hollow tubes measuring 190 Å in diameter. The nine doublets are spaced equally (approximately 100 Å apart) in a ring around the central pair. One fiber member of each doublet appears hollow and the other moderately dense when examined in cross section (fig. 8). The fiber members or subfibers of each doublet are positioned on the same circumference (approximately 0.1 μ from the tail center) and the dense subfiber is always located on the same side of the hollow subfiber of each doublet. The individual subfibers measure approximately 190 Å in diameter. This measurement is in close agreement with that reported by Bradfield ('54).

The spatial relationships of the doublets to each other and the central pair as well as their individual diameters appeared uniform throughout the entire tail with the exception of the neck region where they originate and the terminal piece where they end. Fine radial spokes extending from the central pair to the dense subfiber of each doublet are apparent in some cross sections (figs. 9 and 15). A very low electron dense matrix between the components of the axial filament complex is apparent also in some sections (fig. 8). The reason all sections were not uniform with respect to the presence of spokes and matrix could not be ascertained.

Blom and Birch-Andersen ('60) compared the axial filament complex of bovine sperm with that of sea urchin sperm as critically defined by Afzelius ('59). The axial filament complex of sea urchin sperm features two hollow subfibers composing each doublet with one or two arms of varying length which extend laterally from some subfibers toward the adjacent doublet. Afzelius ('59) showed that the subfibers of each doublet were positioned nearly equidistant from the center of the central pair. Radial spokes also were apparent extending from between the central pair toward each doublet.

The present data on bovine sperm indicated a modification in the axial filament complex which is in accord with that described by Telkka *et al.* ('61) for guinea pig rat and bat sperm. These workers described an electron dense subfiber and a hollow subfiber as components of each

doublet. The occurrence of a solid or semi-solid subfiber member and a hollow member in each doublet also was observed in the flagellum of protozoa (Gibbons and Grimstone, '60) and rooster sperm (Nagano '60).

In addition, Telkka *et al.* ('61) observed two small arms extending laterally from the dense subfiber of each doublet toward the adjacent doublet. There were indications that such arms were present in bovine sperm; however they could not be clearly resolved and were omitted from the interpretative illustration.

A modification in the radial spoke pattern was offered by Fawcett ('62). He described the pattern as consisting of four densities in the matrix of the complex consisting of two curved lines connecting one member of the central pair to the other and nine radial lines connecting the central pair with the dense subfiber of each doublet. Thus the possibility exists that there are subtle connections between elements of the axial filament complex.

The outer ring of nine dense longitudinal fibers (coarse fibers) were studied best from precise cross sections through the middle piece (figs. 8 and 9) in contrast to longitudinal sections (fig. 6). In cross sections these fibers appeared as large electron dense rods of varying cross sectional area and morphology. They comprise the outer ring of the axial fiber bundle and each coarse fiber is located on the same radius as a doublet. In the middle piece there are three large coarse fibers (approximately 1000 Å × 400 Å), five small fibers (approximately 400 Å), and one intermediate sized fiber (approximately 750 Å × 400 Å). Since these fibers taper as they pass down the middle piece into the principal piece, these measurements are only guides to the relative size of the coarse fibers.

Studying bull sperm Bradfield ('54) found three and occasionally four large fibers which exceeded the remaining coarse fibers in cross sectional area, while Blom and Birch-Andersen ('60) observed four large coarse fibers (main fibers) and five smaller fibers (secondary fibers) in the middle piece. A possible explanation for the inconsistency of the findings in these studies to the present one may result

in breed differences of the bulls used. A variation in the morphology and relative size of the coarse fibers among species is evident from the literature.

As observed from cross sections of the middle piece two of the larger fibers are adjacent and a single large fiber is located on the opposite side of the ring. An accepted numbering system for the coarse fibers begins with the single large fiber as 1 and proceeds in a clockwise direction. As may be observed in figure 8 this results in the large fibers being numbered 1, 5 and 6 the intermediate fiber 2 or 9 (depending upon which side of a cross section is examined) and the thin fibers 3, 4, 7, 8 and either 2 or 9 (whichever is not intermediate in size). If flagellar cross sections are oriented such that the dense subfiber is to the right of the hollow subfiber within each doublet (when examined from the center of the section) then the number 9 fiber is always the intermediate sized fiber. The coarse fibers are always oriented in strict relationship to the central pair. This becomes apparent when an imaginary line is drawn through fiber 1 and between fibers 5 and 6 (fig. 9). The line always bisects the axis of the central pair at right angles. Unlike the doublets and central pair the coarse fibers gradually become smaller as they pass posteriorly into the principal piece where they eventually disappear (fig. 15). As observed in sperm of other animals (Telkka et al. '61) the coarse fibers terminate at different levels within the principal piece. Telkka et al. found that the largest fibers observed in the middle piece persist the longest while the smaller fibers terminate earliest. I.e. fibers 3 and 8 disappear first followed by 4 and 7 and then 2 or 9 which ever is smallest. Fibers 1, 5 and 6 terminate last. Wu ('83) has observed in bovine sperm that, although fibers 3 and 8 are much reduced in area, they persist farther down the principal piece than the other coarse fibers. A closer examination in the present study corroborates this observation (fig. 15). Thus, the order of fiber disappearance follows that outlined by Telkka et al. ('61) except that fibers 3 and 8 persist as small dense structures after the other seven coarse fibers terminate. The distance over which the nine

fibers terminate is probably quite short with respect to the length of the principal piece since sections showing missing fibers are not encountered frequently.

If the coarse fibers are examined in cross sections obtained from the most anterior portion of the middle piece (just posterior to the neck) they appear nearly equal in cross sectional area (fig. 7). They also have a core of moderate electron density with a border of greater density. A longitudinal section of this region (fig. 5) shows that the coarse fibers also become striated as they leave the middle piece and enter the neck region. The striations appear as highly electron dense areas approximately 300 Å thick, separated by moderately dense areas 130 Å thick. Although all the bands cannot be counted in figure 5 there are approximately 13 to 15 dense bands on each fiber.

The origin of the doublets and central pair remains quite vague except that they most likely begin in the anterior region of the middle piece. In cross sections through this region (fig. 7) no evidence of the doublets or central pair was found. However, highly electron dense areas along the inside of each coarse fiber were observed. It is possible that the dense areas may represent the origin of the doublets which will eventually move away from the coarse fibers further down the middle piece. It also seems reasonable to believe that the coarse fibers give rise to the doublets or that both are of the same origin, since the additional ring of nine outer fibers is a modification in the spermatozoan flagella of higher forms of animal life.

The mitochondrial helix

The presence of the mitochondrial helix distinctively defines the middle piece of the sperm tail. In bovine sperm the helix makes approximately 65 to 75 turns from the neck to Jensen's ring (fig. 10). The number of turns in the helix varied within this range among three cells which were sectioned longitudinally through the entire middle piece.

The pitch of the spiral is about 20 to 25 over most of the middle piece but it is steeper than this in the neck region. The helix is formed by an undetermined number of elongated mitochondria butting

end to end against one another (fig. 12). There is also evidence that the helix is not single but rather composed of more than one string or strand of mitochondria (fig. 13). In the neck region several mitochondria begin winding down the axial fiber bundle. Some of these terminate before they reach the base of the middle piece. By the same token other strands of mitochondria probably begin part way down the middle piece (fig. 13). The length of any one particular spiral or any one mitochondrion could not be determined accurately.

In a median sagittal section of the middle piece (fig. 6) the elongated tubular mitochondria of the helix are cut in cross sections and appear as a column of small spheres exterior to the axial fiber bundle. The diameter of the mitochondria is approximately 0.10 to 0.15 μ ; however they appear to be considerably smaller in some cases. The smaller diameters most likely represent the tapered terminus or beginning of a particular mitochondrion.

The mitochondrial wall and internal mitochondrial membranes (cristae) are double (figs. 6 and 14). They also may be considered triple if the layer between the inner and outer membrane is included. When the helix is viewed in longitudinal section (fig. 12) the cristae appear to parallel the direction of the helix. The cristae originate from the wall of the mitochondrion then turn and proceed parallel with the wall. They also exhibit occasional branching. The cristae and their branches may be described as flattened or curved vesicles (fig. 6) and tubules (fig. 14).

Occasionally cells without cristae were observed. This has been shown to be a characteristic of spermatozoa fixed following death or injury of the cell (Saacke and Almquist '62, '63a). In these cases the cell membrane was usually severely damaged or missing.

Jensen's ring

Jensen's ring is an electron dense structure which surrounds the axial fiber bundle at the junction of the middle piece and the principal piece. A sagittal section at this junction shows Jensen's ring in

cross section on both sides of the axial fiber bundle (fig. 11). From this view the ring may be described as an electron dense triangle with the base against the last turn of the mitochondrial helix and the apex pointing down the principal piece. This description agrees closely with the observations of Blom and Birch-Andersen ('60). The sides of the triangle are approximately 800 to 1000 Å long and usually extend far enough to cover the first few winds of the fibrous helix.

Of particular interest is the attachment of the cell membrane to Jensen's ring (fig. 11). In some longitudinal sections of the tail the cell membrane appears to stop at the base of the triangle and begin again at the apex. Other sections clearly reveal that the cell membrane adheres closely to the ring without a break. The cell membrane is also anchored about the base of the head (Saacke and Almquist '64). Thus the head, middle piece, and principal piece are distinct and separate with respect to the external environment of the cell. These attachments may be of significance during the traverse of the protoplasmic droplet down the middle piece as well as at the time of the shedding of the droplet. They also may be important during capacitation when changes involving loss of the head cap are believed to occur. Such changes could occur without disturbing the cell membrane surrounding the flagellum. On the other hand, a variation in selective permeability of the cell membrane among the segregated regions of the flagellum may favor cellular metabolism. This idea is introduced only because of the elongated and separated aspects of the cellular components (i.e., nucleus and mitochondria).

Fawcett ('58) observed a physical contact of the cell membrane with part of a more elaborate Jensen's ring which he found in epididymal and testicular spermatozoa of the human. Further attention should be given to this area in studies of the ultrastructure of bovine epididymal spermatozoa. Fawcett ('58) suggested that a difference may exist in the structure of the annulus in ejaculated and epididymal sperm of man.

The fibrous helix and terminal piece

The fibrous helix binds the axial fiber bundle posteriorly beginning at the termination of the mitochondrial helix and extending to within 2 to 3 μ from the termination of the axial filament complex (fig. 2). The unbound end of the axial filament complex has been designated the terminal piece.

In a sagittal section of the principal piece, the helical strands are cut in cross sections (fig. 11). The fibrillar windings

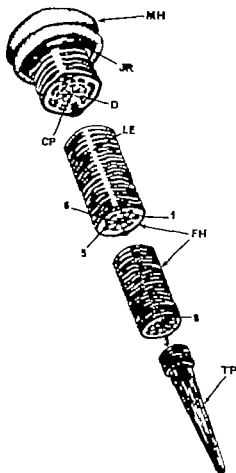


Fig. 2. Graphic illustration of the principal piece and terminal piece. The cell membrane has been removed and the principal piece cut at various locations to show internal structure. Mitochondrial helix, (MH); Jensen ring, (JR); central pair of fibers (CP) doublet, (D) longitudinal element, (LE); fibrous helix, (FH); terminal piece (TP).

are observed as closely-spaced thin, dense strands of variable shape and size. When the principal piece is cut in cross sections however the helical strands are viewed longitudinally (fig. 15). The helical strands become thinner as they move posteriorly along the axial fiber bundle and, at the same time move closer to the axial filament complex as the coarse fibers disappear (fig. 15). This accounts for the posterior taper of the principal piece (fig. 2).

From cross sections of the principal piece two thickenings on opposite sides of the fibrous helix are apparent. The thickenings are always located on the same axis as the central pair of fibers. The interpretations of these thickenings in other mammalian spermatozoa have varied from sectioning artifacts (Shultz Larson '58) to the presence of two longitudinal elements or rods which pass down on both sides of the principal piece (Bradfield, '53 '55 Fawcett, '58 '62 Telkka et al., '61). Longitudinal sections of the principal piece of bovine sperm obtained in the present study (figs. 16 to 18) support the latter interpretation. The rods apparently begin at the anterior extremity of the fibrous helix and become thinner posteriorly. They either disappear prior to the termination of the helix or become sufficiently small to escape detection in cross sections near the terminal piece (fig. 15).

A reasonable proposal has been made by Fawcett ('58) that the existence of longitudinal rods precludes the presence of a helix. It is not clear however whether the circumferential strands lose their identity in the longitudinal elements or split and pass around them. Further study of this relationship should be conducted before the term helix is abandoned.

The neck

The neck of the bovine sperm is characterized best by the lack of mitochondria and the presence of the laminated coarse fibers entering the recess or implantation socket at the base of the head (figs. 3 and 4). The beginning of the mitochondrial helix in relation to the base of the head varies sufficiently to conclude that the

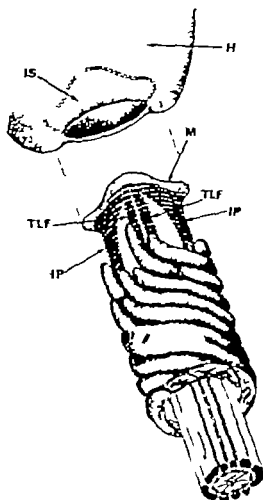


Fig. 3 Graphic illustration of the neck region. The cell membrane is removed and the tail separated from the head to show the articulation mechanism. Head, (H); implantation socket or head recess, (IS); matrix, (M); implantation plates (IP); thin laminated fibers, (TLF)

length of the neck probably ranges from 0.3 to 1.5 μ or more.

A sagittal section through the neck on a plane with the flat surface of the head (fig. 20) shows two relatively large laminated fibers entering the head one on each lateral extremity of the head recess. Blom and Birch-Andersen (60) have referred to these two structures as the implantation plates. These workers believe that each plate is formed by the merger of two thick, coarse fibers which they found on each side of the axial fiber bundle. A sagittal section through one of the implantation plates at right angles to that

shown in figure 20 may be seen in figure 24. As the implantation plate is traced from its anterior base posteriorly in this figure it separates into more than one fiber. The specific fibers which contribute to the implantation plates however could not be determined. One precluding factor is that the fibers we observed to be of nearly equal size to the middle piece just prior to entering the neck (fig. 7).

In addition to the two implantation plates, at least four other laminated fibers enter the base of the head. The top of two of these fibers may be seen entering the head recess between the implantation plates in figure 20. The present interpretation is that these two fibers make a 180° arc at the top of the head recess and pass back down into the neck (fig. 23). The laminated fibers are positioned close together and are considerably thinner than the implantation plates. This relationship is shown in the graphic illustration (figs. 3 and 4). A cross section through the neck region of a boar spermatozoon presented by Nicander and Bane (62b) shows that a fifth small fiber is present in the neck along with the two implantation plates.

A homogeneous matrix across the top of the laminated fibers forms a common base for the insertion of the fibers into the head recess (fig. 20). The common base is held in the head recess by a ball (fig. 20) on each side of the recess; this a modified ball and socket joint is produced (fig. 3).

Blom and Birch-Andersen (60) described the articulation mechanism as consisting of a capitulum, formed by the merger of the implantation plates, which fits into the concave base of the head or socket. They suggested that the remaining fibers may attach directly to the base of the head. In the present study no evidence of a physical connection of any fiber elements with the head was found. The thin fibers as well as the implantation plates, are considered to form the common cap which fits into the base of the head. The cap appears to be held in place merely by the lips formed at each end of the opening into the head.

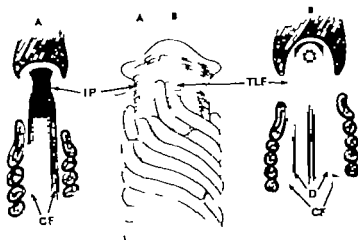


Fig. 4 Two-dimensional sagittal sections through the neck region (A and B). Section A shows the relationship of the implantation plate (IP) to the coarse outer fibers (CF). The implantation plate on each side splits forming some of the coarse fibers that extend down the tail.

Section B shows thin laminated fiber (TLF) which is continuous at the top of the head recess. This section also shows the possible origin of the doublets (D) budding away from the coarse fibers.

A possible role of the laminated portion of the coarse fibers may be advanced on the basis of the sagittal section through the two implantation plates shown in figure 22. The implantation plate on the left of this figure appears to be in a state of contraction while the plate on the right is in the expanded state. Thus the alternate contraction and expansion of the laminated fibers in this region may initiate the flagellar wave.

Although considerable debate still exists on the pattern of the flagellar wave the size and therefore strength, of the implantation plates would suggest a two-dimensional or planar wave. This is supported by the suggestion of Blom and Birch-Andersen ('60) that the implantation plates are formed by the thicker outer fibers on each side of the axial fiber bundle. These fibers are known to be dominant in size throughout much of the tail. However similar contraction and expansion of the thinner laminated fibers in the neck region would contribute to the wave to a lesser degree but in the third dimension.

Thus the present interpretation favors a predominantly two-dimensional flagellar wave but with some movement in the third dimension. Such a mechanism

might be compared with the flat, figure-of-eight, flagellar pattern proposed by Gray ('58) for bull sperm.

The presence of the proximal centriole in the recess at the base of the head was confirmed however its morphology remains speculative. The characteristic ring of beads was observed only in sagittal sections of the neck when the head was cut at or about 90° to its flat plane (figs. 25 and 26). Fawcett ('58) has stated that the proximal centriole of the spermatozoon is no different than the typical centriole of a somatic cell. The typical centriole takes the form of a cylinder with a wall composed of nine rods arranged longitudinally. Thus, the centriole shown in figure 25 might represent a cross section of the cylinder. An oblique section through the cylinder is shown in figure 21. The cylinder is located at the base of the head oriented at about 70-80° to the tail on an axis across the greatest dimension of the head. An excellent electron micrograph presented by Nicander and Bane ('62b) shows the proximal centriole of a boar spermatozoon as consisting of nine tubular triplets i.e. each of the nine tubes constituting the centriole contain three separate tubules.

Further research should be conducted to clarify the morphology of the proximal centriole and the relationship of the flagellar fibers to each other and the centriole in the neck region. Ultrastructural individuality among sperm also should receive more attention. Based on ultrastructural variations particularly those observed in the mitochondrial helix cells may possess a variety of features which are capable of normal physiological function.

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PLATES

PLATE 1

EXPLANATION OF FIGURES

Figs. 5 to 9 Osmium-stained sections of the middle piece.

- 5 Sagittal section through the neck and anterior extremity of the middle piece showing relations of the outer coarse fibers in this region. / 65,000.
- 6 Median sagittal section of the middle piece. From the outside margin to the center it shows the cell membrane, a row of mitochondrial cross sections, an outer coarse fiber, a doublet, and center fiber. Distinct vesicular cristae are apparent within the mitochondria. Occasional, small mitochondrial cross section probably represents the tapered beginning or terminus of mitochondrial strand. / 50,600
- 7 Cross section through the middle piece near the neck. The outer coarse fibers are nearly equal in size and the mitochondria are oriented at sharp angle down the tail. Note the absence of central pair and doublets. The highly electron dense, inside edge of each coarse fiber may represent the origin of the doublets. / 63,000
- 8 Cross section through the middle piece showing components of the axial fiber bundle. The large fibers (1, 5, and 6) and the intermediate sized fiber (9) are numbered for orientation. A hollow and dense subfiber constituting each doublet is apparent. / 91,000
- 9 Cross section through the middle piece showing the orientation of coarse fibers. A line passed through fiber 1 and between fibers 5 and 6 always bisects the axis of the central pair at right angles. Four radial spokes between the central pair and solid subfiber of each doublet are apparent. / 78,000

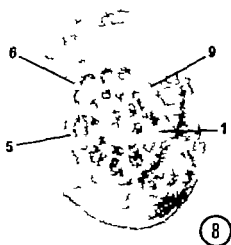


PLATE 2

EXPLANATION OF FIGURES

Figs. 10 and 11 Osmium-stained sagittal sections through the middle piece and anterior portion of the principal piece.

- 10 Low magnification electron micrograph showing entire length of the middle piece. In this cell the helix makes approximately 70 turns about the axial fiber bundle. $\times 15,400$.
- 11 High magnification electron micrograph showing the junction of the middle piece and principal piece. The cell membrane (CM) anchors itself on Jensen ring (JR). Occasionally membranous vesicles (MV) are found immediately under the cell membrane. $\times 44,500$.



PLATE 2

EXPLANATION OF FIGURE

Figs 10 and 11 Osmium-stained axial section through the middle piece and anterior portion of the principal piece

- 10 Low magnification electron micrograph showing entire length of the middle piece. In this cell the helix makes approximately 70 turns about the axial fiber bundle. 15400.
- 11 High magnification electron micrograph showing the junction of the middle piece and principal piece. The cell membrane (CM) anchors itself on Jensen ring (JR). Occasional membranous vesicles (MV) are found immediately under the cell membrane. $\times 44500$

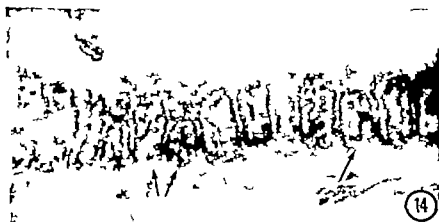
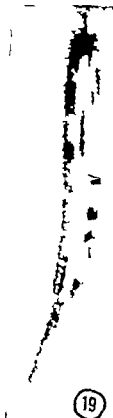
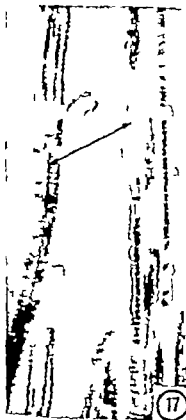


PLATE 4

EXPLANATION OF FIGURES

Osmium stained section of the principal piece

- 15 Cross section at different level along the principal piece: anterior region, A; middle region, B; and posterior region, C. The principal piece tapers in posterior direction with the longitudinal elements (LE) and circumferential strand (CS) of the fibrous helix becoming thinner. The coarse fibers become thinner in posterior direction and eventually disappear. Fibers 3 and 8 section C persist farther down the principal than the other seven fibers (arrow). $\times 47,500$.
- 10 Sagittal section of principal piece showing continuity of one longitudinal element (arrow) in contrast to the circumferential strand on the other side of the axial fiber bundle. A periodicity of electron dense area along the inside and outside edge of the longitudinal element suggests that the circumferential strands may pass around the longitudinal element. $\times 60,000$.
- 17 Low magnification electron micrograph comparing two sagittal sections of the principal piece. The appearance of the longitudinal element (arrow) and circumferential strand may be compared. $\times 22,000$.
- 18 High magnification of the longitudinal element. $\times 48,500$.
- 19 Oblique section showing the end of the fibrous helix and beginning of the terminal piece. The axial filament complex is observed to extend beyond the helix thereby forming the tapered terminal piece. $\times 35,000$.



Persistent Stunting Following X Irradiation of the Fetus

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ABSTRACT CFI female mice were times mated and the embryos at each gestation day from 0.0 to 18.0 were x-rayed to 100 and the young carried to four months at which time a skeletal study was made. With this exposure the litters were reduced to size, following irradiation at certain gestation ages, and there was neo-natal mortality so that this skeletal study is based upon the survivors to four months and represents the maximum development under the conditions of irradiation. The sex ratio was not altered by this irradiation. Male mice of this strain are always heavier than the females of the same age, and this exposure reduced the over-all average of either sex by 2.5 grams. The skeletal measurements were taken from 1,006 radiographs of the living animals, and the averages calculated for each gestation day. There were sex differences in stunting, even when x-irradiation occurred before day 9.0. When the differences were pronounced the female was the more adversely affected. The highest statistical significance in skeletal effects of seven measurements was between 11 and 13 days, when the embryo shows the earliest skeletal differentiation. Such mice were topographically well developed.

Stunting is a frequent sequela of embryonic and fetal x-irradiation, as has been well established. The amount of stunting with respect to dose of x-irradiation and the persistence of stunting for an extended post-natal period have not been so well established, although Russell ('54-'56-'60) reported skeletal effects of 200 to 400 exposures. It was the purpose of this project, using large numbers of mice to determine statistically the effect of a standard dose of x-rays (100 r) at each of the prenatal stages from 0.0 through 18.0 days gestation, as determined on the four month old adult mouse. Using a standard dose of x-irradiation it is possible to establish those prenatal stages when the skeletal primordia are particularly radiosensitive.

MATERIALS AND METHOD

The mouse used was the CFI non-Swiss albino strain. Virgin females of more than two months of age were exposed during a two hour period to mature males of the same strain, and those with vaginal plugs at the end of this period were segregated and labeled as to the time of conception. Since the x-irradiation to be used was the LD50 for embryos of certain ages, the

litter mate survivors would most likely have reduced vitality as would their mothers so that foster mothers were provided for all newborn mice of this project. Foster mothers comprised similar females simultaneously mated, but never x-irradiated, whose young were removed at birth and replaced by a litter which had been x-rayed in utero. When this exchange was made in a new box, with new shavings and new environment the foster mothers generally accepted the new litter without any difficulty and nursed them regularly as their own.

The x-ray conditions were as follows. Dual tubes were used in cross fire spaced 72 cm each from the center of the gravid uterus. The voltage of the machine was 164 KVP and the milliamperage of each tube held at 30 with filtration of 0.28 mm Cu and 0.50 mm Al, HVL of 0.6 mm Cu, and dose in air 50 r per minute. The previous experience of x irradiating five mice at a time (which increases slightly the irradiation due to scatter) and within a

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porous polyethylene container (which absorbs slightly the irradiations) gave the estimated rads absorbed by the embryos or fetuses very close to the dose in air at that position. The exposure was thus two minutes in all cases.

For the radiographs the mice were not anesthetized but were immobilized with strips of masking tape. Five mice were fastened to the carrier of a sheet of 10×12 DuPont x-ray film which was then properly identified with lead letters and numbers and placed at a uniform distance of 20 inches from a diagnostic x-ray tube. The voltage used was 40 milliamperes 10 and the uniform exposure was two seconds. The films gave excellent contrast (see illustrations). Each and every mouse skeleton was thus radiographed and this was later mounted on an x-ray viewing box and each bone measurement taken under a hand lens of $10 \times$ magnification. All measurements were made by the same person.

The mice were part of an experiment designed to determine the long term sequelae of embryonic and fetal x-irradiation so that most of them are still alive

14 months of age. However it is believed that the skeleton has reached a state of development by four months of age so that that age was selected for this particular study of skeletal effects.

EXPERIMENTAL DATA

The statistical data from this project are presented in the several tables below. While the experiment began with 25 males and 25 females for each set of variables and 50 each for the controls these numbers could not be held against the occasional losses due to accidents or to other and natural causes. Chief among these was diarrhea. The best cure for this condition is to treat the regular food with tetracycline hydrochloride (soluble Polyotic) for a 1-2 week period. By four months, when the skeletal study was made the minimum number of males surviving for any gestation age group was 18 and for the females it was 16 while 45 and 43 of the males and females of the controls survived. All of the averages

are based upon the number of survivors at the time of the examination.

A total of 307 pregnancies were provided for this study plus 12 control pregnancies. At certain gestation ages the loss in embryos due to 100 r x irradiation was sufficient to require twice the usual number of pregnancies. Since the skeletal study was made on the survivors at four months it is well to present here the litter average and 30 day post-natal survival of mice x irradiated at different gestation ages.

Among the controls there were 531% males and 46.9% females born. This compared with 53.0% males and 47.0% females among those x-irradiated so that this exposure did not shift the balance of the sexes by selectively eliminating one or the other. While there were fewer controls than the total of x-irradiated embryos the deaths during the first 30 post-natal days affected a higher percentage of the controls where 15% of the males and 17% of the females died due to underlined factors. During this same period, and considering all gestation ages together there were 0.6% deaths among the x-irradiated male and 10% among the females. However among those delivered none of the controls was born dead or had a gross anomaly while 39 out of 2,257 (1.7%) of those x-irradiated were born dead or anomalous.

The average litter size of all of the x-irradiated pregnancies was 7.60 which was lower but not significantly so, than the 8.00 average for the controls. Such reduction as existed for the various stages represented intra-uterine deaths and resorption and these occurred more frequently among the very early stages of pregnancies, (0.0 days or immediately after conception). There was also some litter size reduction on days 0.5 to 2.0, 7.0 and 8.0. The stunning data of this paper are derived from embryonic and fetally x-irradiated mice that not only came to term, but which also survived the critical first 30 post-natal days plus three more months. Thus, the data really concern the healthiest of the survivors at maturity. Surviving males of this strain whether controls or x-irradiated experimental were always heavier than were the controls.

TABLE 1

Effect on litters of 100 R x-rays at different gestation ages mice

Gestation day	Pregnancies	Number delivered			Litter av.	Dead in 30 days		Eaten	Abnormal or born dead
		Total	Male	Female		Male	Female		
Controls	12	96	51	45	8.00	8	8	1 (1.0%)	0
0.0	24	110	56	54	4.58	1	2	0	1
0.5	20	135	69	78	6.75	2	0	0	0
1.0	16	108	63	45	6.75	4	5	0	0
2.0	11	78	38	38	6.90	1	4	1 (1.3%)	0
3.0	16	128	66	59	7.11	11	11	19 (15.0%)	0
4.0	13	98	53	43	7.53	10	5	18 (18.0%)	1
5.0	14	104	49	55	7.50	8	4	0	0
6.0	12	87	46	41	7.25	2	4	0	0
7.0	18	106	62	47	6.05	4	1	1 (1.0%)	0
8.0	17	107	68	45	6.29	3	3	0	23 (21.5%)
9.0	14	127	73	64	9.78	7	10	0	2
10.0	19	134	78	56	7.05	10	9	24 (17.0%)	8
11.0	16	136	66	67	8.50	5	8	7 (5.1%)	0
12.0	19	174	93	81	9.15	21	15	12 (7.0%)	0
13.0	14	98	50	48	7.00	2	2	10 (10.0%)	4
14.0	13	118	63	56	9.07	10	4	10 (9.0%)	0
15.0	12	106	56	52	9.00	2	2	0	0
16.0	14	125	70	53	8.93	7	10	0	0
17.0	12	105	50	55	8.75	6	7	0	0
18.0	11	90	52	38	8.18	1	2	0	0

ing females at four months of age. The over-all average of all mice x-irradiated to 100 r in utero from 0.0 to 18.0 days gave 30.5 grams for the males and 24.0 grams for the females, a mean loss from the control average of about 2.5 grams per mouse of either sex. This does not tell the entire story however as the data show that the greatest single depression in weight occurred when the males were exposed on gestation day 13 (31% loss) and the females on gestation day 12 (28% loss) although day 13 was also low for the females (23% loss in weight) (see fig. 1). As will be shown below the greatest depression in bone or skeletal growth occurred when the x-irradiations were administered on day 11 or 12 (table 2 and fig. 2).

These average weight data were all subjected to statistical analysis. The standard deviation was estimated from the difference between the highest and the lowest weight of the individual males and females separately. For the males it was 3.32 grams and for the females 2.38 grams based on a large number of degrees of freedom. The mean weight for each batch of x-irradiated mice was compared with the control, using the standardized normal deviate. Taking into account that for each sex 20 comparisons are made the absolute critical value

was 3.02 for each sex. Statistically significant reductions in body weights occurred for the males following x-irradiation on days 5 and 9 through 18 with the most pronounced effects on days 12 through 14. For the females there was a statistically significant reduction in average weight when the x-irradiation occurred on days 8 through 18 with the most drastic reductions on days 11 through 14. Thus, the second half of gestation appeared to be the period of most significant stunting by x rays.

For the skeletal data a total of 917 x-irradiated and 88 control mice were radiographed and seven of their skeletal measurements were taken, making a total of 7,035 measurements for the statistical analyses. The seven measurements taken included two of the skull (lateral and antero-posterior) and lengthwise measurements of the spine humerus ulna, femur and tibia. For the skull the AP measurement was from the most posterior aspect of the occiput to the anterior limit of the frontal bone. For the skull LAT the maximum width was determined. The spine was measured from the tip of the odontoid process to the end of the fourth sacral vertebra. For the other long bones the maximum length was determined. Other

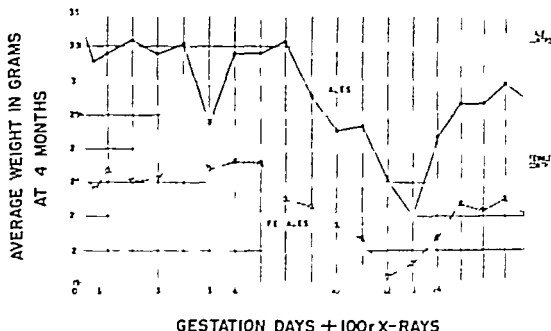


Figure 1

and smaller bones might well have shown some reduction but these particular bones were chosen as representative and rather accurately measurable.

The table above presents the average of the seven skeletal measurements of male and female mice x-irradiated at each of the gestation days 0.0 through 18.0. If the skeletal data from males and females are plotted separately certain sex differences in response become apparent (fig. 2). There is little deviation from the control measurements following 100 r x rays to the mouse embryo during the first half of gestation or from 0.5 to 9.0 days with the possible exception of the ulna of the female exposed on day 3. Since days 2 and 4 fit into this depression it cannot be an artefact but there is at present no explanation of this disparity of the female ulna as compared with the reaction of the male ulna. The humerus then the spine and the ulna (in that order) appear to be more affected in the female than in the male when x-irradiations occur prior to 9.0 days gestation. On the whole it appears that 100 r does not seriously affect skeletal growth of either male or female when the exposure occurs before 9.0 days gestation (fig. 2).

Following gestation day 9.0 the situation is quite different so that a detailed statistical analysis has been made of three particular measurements taken into consideration the limits of variation within each averaged group. The measurements considered were of the spine, ulna, and clivus. For each bone the measurements within each sex were compared against the x-irradiated controls giving 38 comparisons for each bone. The critical level was therefore taken as the standardized deviate corresponding to 1.76×0.05 for each comparison. An estimate of the variability was obtained from the ranges observed in each sample. The resulting degrees of freedom are some 500 and therefore taken as the "true value". The absolute value of a standardized normal deviate to be exceeded is 3.81. For all of the bones and for both sexes the highest statistical significance is obtained at 11 through 13 days of gestation. As the bones are highly correlated in their development, there is not too much significance in the fact that the danger period for radiation-stimulus coincides for all of the bones studied. The effect appears to be over all and therefore the fetally x-irradiated mice may be grossly stunted but topographically normal.

TABLE 2

Mice at four months of age following 100 R x-rays during embryonic stages

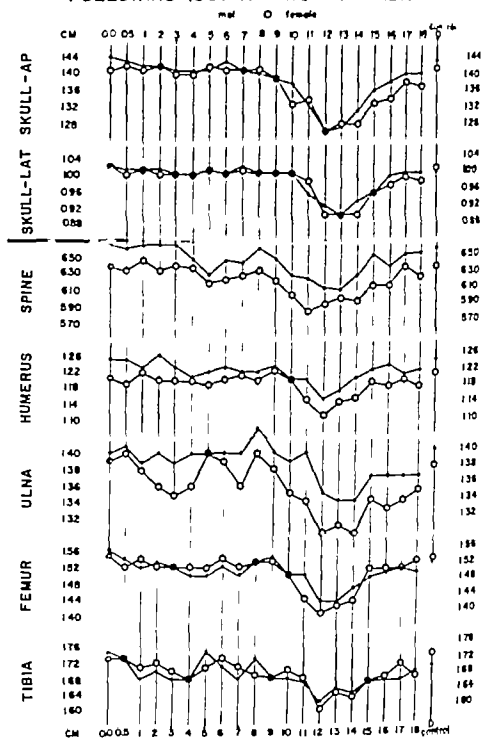
Average measurements skeletons in millimeters

Cont. age reared	Sex	No.	A. wt.	Skull		Spine	Humerus	Ulna	Femur	Tibia
				Lat.	Ap.					
			gm							
Controls	male	45	33.7	1.00	1.43	6.59	1.34	1.40	1.52	1.70
Controls	female	43	26.3	1.01	1.41	6.35	1.21	1.38	1.53	1.73
0.0 da.	male	24	34.1	1.02	1.44	6.62	1.25	1.40	1.56	1.75
0.0 da.	female	24	25.7	1.02	1.41	6.37	1.20	1.39	1.55	1.73
0.5 da.	male	23	32.2	1.01	1.43	6.60	1.25	1.41	1.54	1.73
0.5 da.	female	24	24.7	1.00	1.42	6.33	1.19	1.40	1.52	1.73
1.0 da.	male	25	32.5	1.01	1.42	6.64	1.23	1.39	1.52	1.68
1.0 da.	female	19	25.7	1.01	1.41	6.45	1.22	1.38	1.54	1.71
2.0 da.	male	23	33.3	1.01	1.42	6.64	1.26	1.40	1.53	1.70
2.0 da.	female	25	25.1	1.00	1.42	6.31	1.20	1.36	1.52	1.72
3.0 da.	male	24	32.6	1.00	1.41	6.64	1.23	1.39	1.52	1.68
3.0 da.	female	23	25.2	1.00	1.40	6.38	1.20	1.35	1.52	1.70
4.0 da.	male	21	33.1	1.00	1.41	6.48	1.21	1.40	1.50	1.68
4.0 da.	female	16	27.2	1.00	1.40	6.36	1.20	1.36	1.52	1.68
5.0 da.	male	21	28.6	1.01	1.41	6.29	1.22	1.40	1.50	1.75
5.0 da.	female	25	25.9	1.01	1.42	6.19	1.19	1.40	1.52	1.71
6.0 da.	male	25	32.7	1.00	1.43	6.45	1.23	1.40	1.52	1.71
6.0 da.	female	25	26.3	1.00	1.41	6.21	1.20	1.39	1.54	1.73
7.0 da.	male	25	32.7	1.02	1.41	6.41	1.22	1.40	1.50	1.68
7.0 da.	female	25	26.2	1.01	1.41	6.28	1.21	1.26	1.52	1.71
8.0 da.	male	23	33.4	1.00	1.40	6.60	1.22	1.43	1.53	1.73
8.0 da.	female	22	24.1	1.00	1.41	6.21	1.20	1.40	1.53	1.77
9.0 da.	male	23	30.2	1.00	1.39	6.46	1.23	1.40	1.54	1.68
9.0 da.	female	22	23.6	1.00	1.39	6.20	1.22	1.38	1.53	1.68
10.0 da.	male	25	28.2	1.00	1.38	6.26	1.20	1.39	1.50	1.68
10.0 da.	female	22	22.6	1.00	1.33	6.02	1.20	1.35	1.50	1.70
11.0 da.	male	25	28.5	0.95	1.33	6.23	1.20	1.40	1.50	1.67
11.0 da.	female	23	21.6	0.96	1.34	5.83	1.15	1.34	1.44	1.68
12.0 da.	male	25	25.1	0.92	1.26	6.10	1.15	1.35	1.43	1.62
12.0 da.	female	23	19.5	0.90	1.26	5.90	1.11	1.30	1.40	1.60
13.0 da.	male	23	23.1	0.90	1.27	6.09	1.17	1.34	1.42	1.65
13.0 da.	female	20	20.3	0.90	1.22	5.89	1.14	1.31	1.42	1.64
14.0 da.	male	23	27.7	0.93	1.31	6.25	1.20	1.34	1.46	1.64
14.0 da.	female	25	21.7	0.90	1.28	5.95	1.15	1.30	1.42	1.63
15.0 da.	male	24	29.7	0.95	1.26	6.20	1.22	1.37	1.49	1.67
15.0 da.	female	24	23.8	0.93	1.33	6.13	1.19	1.34	1.51	1.67
16.0 da.	male	23	22.7	0.99	1.38	6.23	1.22	1.37	1.50	1.67
16.0 da.	female	24	23.4	0.97	1.34	6.13	1.18	1.33	1.51	1.68
17.0 da.	male	18	30.9	1.00	1.40	6.22	1.21	1.37	1.51	1.67
17.0 da.	female	18	24.1	0.99	1.38	6.27	1.20	1.34	1.51	1.71
18.0 da.	male	23	30.1	1.00	1.40	6.64	1.22	1.37	1.50	1.69
18.0 da.	female	21	25.1	0.96	1.37	6.24	1.18	1.35	1.52	1.68

Note: Each figure represents an average taken from the number of males or females shown in column under No.

In some cases animals died between the weight-taking and the phurial radiogram, but in each case the average derived was based upon the actual number of survivors either weighed or radiographed.

MOUSE SKELETON AT 4 MONTHS OF AGE FOLLOWING 100r X-RAYS TO EMBRYO



this time no bones are formed and osteoblasts are just beginning to appear from sclerotome. Ossification begins on day 15.

With regard to the measurements of the spine, there were seven gestation periods when 100 r x-rays resulted in statistically significant reductions namely days 5-10 through 14 and 16 for the males and the same number of days but with a slightly different distribution for the females, namely 10 through 16. The most radio-sensitive days with respect to the spine were 12 and 13 for the males and 11 and 2 for the females. This could suggest slightly earlier spine development in the female.

With regard to the tibia, the male mice showed statistically significant stunting following 100 r x-rays on days 12 through 14 while the females showed such reductions in the tibia on days 9 and 11 through 16. Here as in most of this study female sensitivity seemed to precede the male by one day whether in regard to average weight or specific bone measurements. Curiously the males showed a statistically significant and unexplained increase in tibia average length when the x-irradiations occurred on day 5. For the males the maximum stunting effect occurred when the x-irradiations were on day 12 and while it was on the same day for the females, the effect was considerably greater (10.24 over 3.81).

With regard to the ulna, it has already been pointed out that for some reason this bone shows a significant reduction in the female, as compared with the male on days 2 through 4 with the greatest stunting on day 3 of gestation. There is another drop on day 7. In addition when

males were x-rayed on days 12 through 14 there was a significant stunting of the ulna (maximum at days 13 and 14) while the females showed significant stunting following exposures on days 11 through 17 with the maximum reductions on days 12 and 14. Again the females reacted a day earlier than the males.

Consistently day 11 showed the beginning of x-irradiation stunting (with the exception of the female ulna on day 3) although the ulna and the skull-AP of the female and the spine of both sexes showed significant effects earlier on day 10. In most instances, the maximum effect on any long bone was on the bone of the female as opposed to the male (fig. 2).

For illustrative purposes a search was made for the control and the x-irradiated male and female on gestation day 12 which had skeletal measurements closest to those of the mean for those conditions and sex. The data of the following table 2 when compared with the mean of table 2, indicate that the mice chosen do in fact represent the means for the four sets of conditions.

Having identified those four mice which best exemplified the controls and the x-irradiated mice at 12 days gestation, a set of radiographs were taken of these mice to demonstrate the skeletal effects (plate 1). It will be noted that at first examination there is no evidence of gross reduction in size between the controls (nos. 1 and 3) and the comparable male (no. 2) and female (no. 4) x-irradiated experimental mice selected as most closely representative of the means. These are mice which survived x-irradiation to 100 r at 12 days gestation and also survived the critical

TABLE 2

Skeletal Measurements	Males				Females			
	Controls (43)		12 G.D. 100 (25)	A	Controls (43)		12 G.D. 100 (23)	A
	A	D-2 no. 5	XIII (a-3) no. 5		A	D-15 no. 5	XIII (a-6) no. 3	
Skull lat.	1.00	1.00	0.90	0.92	1.01	1.0	0.90	0.90
Skull ap	1.43	1.40	1.30	1.28	1.41	1.4	1.3	1.28
Spine	6.39	6.5	6.1	6.1	6.35	6.3	5.9	5.9
Humerus	1.24	1.2	1.1	1.15	1.21	1.2	1.1	1.11
Ulna	1.40	1.4	1.3	1.35	1.38	1.4	1.3	1.3
Femur	1.52	1.5	1.4	1.43	1.53	1.5	1.4	1.4
Tibia	1.70	1.7	1.6	1.62	1.73	1.7	1.6	1.6

first 30 days of postnatal adjustment and were radiographed at four months of age. Upon closer examination it can be seen that there is an over all reduction in size involving probably every bone of the body with the x irradiated female showing relatively the greatest stunting (no 4) (A study is in progress to determine whether this amount of x irradiation has any sequelae aside from stunting such as reduction of life span or the incidence of tumors and leukemia.) Such mice appear to be quite normal but this study reveals statistically significant stunting when the x irradiation occurs at certain gestation ages.

DISCUSSION

Mammalian embryos develop in an aquatic and homeostatic environment relatively protected against the vicissitudes normally encountered by embryos of poikilothermic forms and yet some 5% of all human births bear congenital anomalies. Whether these are of genetic origin or are due to traumatic imbalance in the physical environment or to both factors has not yet been determined. There are a variety of extrinsic conditions which can cause congenital anomalies through the other (Rivers et al '59 Kalter and Warner '59 Fraser '59 Lock '62) one of which is rapidly gaining respect namely ionizing radiations (Levy et al '59 Rugh et al '59-'63).

In analyzing congenital anomalies one must remember that there are two aspects of the problem. There is the abnormal environment which may be physical or chemical or both and there is the reacting embryo. Embryos of some strains are inherently resistant to damage and others are highly susceptible. At some stages of development congenital anomalies are more readily produced than at others some anomalies may be caused over a relatively long developmental period while others may have a very limited time of susceptibility the embryo is a mosaic of sensitivities some organs tissues and cells being sensitive at one moment while others later to be sensitive are resistant and finally since the embryo is composed of undifferentiated cells it is able to redirect the undamaged cells to fill the gap

caused by the destruction and removal of susceptible cells. This power of redirection of undamaged and as yet undifferentiated cells is not new to the experienced embryologist (nor to the embryo) but it has been erroneously described as recovery or repair. These terms have an entirely different meaning in the hospital clinic than they might for the embryo. Actually there is abundant evidence in the literature and data from this paper to support the contention that cell death in the embryo does not result in a localized deficiency but rather in an over all stunting or generalized deficiency which does not seriously affect the topography of the individual but does reduce his overall mass.

With regard to the extrinsic factors these may alter the chemical or enzymatic reactions which are highly critical for certain developmental processes may have abscopal effects rather than direct and start a chain of biochemical reactions and may have thresholds and intensity variables. These concepts are the more plausible when we remember that the embryo is not a conglomeration of unrelated parts but that there seems to be an over all controlling organization which continuously integrates the parts of the developing embryo toward an organism functional as a whole.

Highly penetrating x or gamma rays delivered in a short period, have the advantage of a clean traumatizing agent without the unknown and indeterminate residual and lingering effects of chemicals or isotopes. The interval of exposure can be limited to seconds or minutes without further contamination so that the time and developmental stage factors can be sharply delimited. In these experiments the age of the embryo was controlled to within 10 hours and the x irradiation to two minutes.

The most significant studies of x-ray effects on the rodent skeleton have been reported by Russell and Russell ('50-'57). They found the critical period for apophyseal shift in the thoraco-lumbar border from 7.5 to 9.5 days with the peak of reaction at 8.5 days in the mouse. Exposures to as little as 25 r on day 8.5 altered the rib development in B alb C mice for the strain 129 and (C57 x NB) F hybrid

were rather resistant to such skeletal changes. L. B. Russell ('56) reported that on increasing the dose the period of response can usually be lengthened and the incidence and degree of abnormality usually can be increased. The vertebral column and thorax of newborn mice had been examined after irradiations on days 0.5 to 13.5 following fertilization. They also stated that "Irradiation during the first five days (prior to the implantation of the embryo in the uterus) leads to all-or-none effects: there is a high incidence of death shortly after irradiation but those embryos that survive are normal. Since the doses used were 100 to 400 r this is a very significant statement, if the survivors are truly normal.

Similar studies have been made on the digits of mouse embryos (Neyfakh '60) in which it was found that 300 r x-rays during the gestation period of 10 to 12 days caused reduction of 1 to 4 digits or increases of 1 or 2 digits. Forelimb digits were reduced by exposures on day 11 but the same irradiation caused reduction of hindlimb digits on days 11 or 12. Rabbits exposed to 300 r on day 13 showed the most pronounced effect on bone development with lengthwise retardation and delay in the appearance of ossification nuclei in the long bones of the extremities. Ehling and Randolph ('62) described skeletal anomalies in the F following x-irradiation of the post-spermatogonial stages of male mice, mating them with normal females. This effect was not congenital but genetic.

Following the atomic bomb in Japan there have been numerous studies on the skeletal development of children who were exposed in utero to ionizing radiations. Plummer ('32) described microcephaly with mental retardation in seven out of 11 children exposed in utero within 1,200 meters of hypocenter while among the other four there was one with small head measurements but without obvious mental retardation. Greulich et al. ('53) stated that our findings indicate that the physical growth and development of the children who survived the atomic bombing of Hiroshima and Nagasaki was adversely affected by the experiences and that some of the retardation in their height, weight, and skeletal development was still evident

at the end of "50 five and one-half years after the bombing." Sutow ('54 '55) stated that females exposed during the first half of gestation had mean height, weight, and head circumference significantly less than the controls while the males showed only the mean head circumference to have a significant reduction. Irradiation during the second half of gestation had no skeletal effects but their I.Q. ratings were lowered. The effects on the skeleton were spina bifida, lumbarization sacroization, shortened phalanges accessory epiphyses at the bases of the metacarpal bones, and neural arch defects. Yamazaki et al. ('54) stated that the mean height and head circumference of children born to mothers with major signs of radiation exposure were significantly smaller than the controls, and that fetal, neonatal, and infant mortality assumed significant proportions only when the exposure occurred during the second or third trimesters of pregnancy.

Other studies have been directed toward determining the roentgen exposure of a gravid uterus during routine obstetrical and gynecological procedures. Mobius ('51) stated that with a combination of antero-posterior, lateral, and sitting positions the aggregate exposure of the gravid uterus in diagnostic radiology could be kept to less than 1 r with a skin dose of 8 to 8 r. By precision coning precision centering, marking the area of the fetal head protecting the fetus with a lead apron etc. there should be a minimum fetal exposure (Kendig, '60). Payne ('60) found that the greatest exposure of the fetus occurred in pelvimetry but was never more than 2.1 r while Berman and Sonneblück ('57) found it to be 2 to 4 r and for hystero-salpingography it could be 3.2 r. They stated that "there should be no hesitation in utilizing indicated diagnostic procedures in obstetrics and gynecology if the technique is properly carried out. However Pitter and Svejda ('52) reported a two year old girl who had been examined in utero at four five and six months for diagnostic purposes, and this child had syndactyly brachydactyly microphthalmus microcornea, strabismus hypermetropia amelogenesis and odontogenesis imperfecta. Exposures were not given but

must have exceeded the normal diagnostic levels.

Specific skeletal effects have been caused by drugs (e.g. 6-aminocaproic amide) administered on days 10 or 11 to mice resulting in malformations of both the axial and appendicular skeletons and often causing cleft palate (Pinsky and Fraser '59). Cleft palate can be readily produced by x rays on day 10 (Erschoff and Bavetta '59) or on day 11 (Callas '62).

Gestation age at the time of x ray insult appears to bear a significant relation to the nature and the degree of skeletal modification. Johnson ('33) described the time and appearance of ossification centers in the albino mouse and this was generally about day 15 and took four days so that irradiation on day 11 or 12 preceded the onset of ossifications. Exposures on days 11 or 12 must therefore include the early differentiating and highly sensitive osteoblasts. Wodard ('37) stated that both the anabolic and catabolic processes in bone are damaged by external irradiation and that such damage as is inflicted appears slowly and lasts for a long time. Clinically significant bone effects of x irradiation include stunting of growth in children, generalized and patchy demineralization, athologic fractures, total disintegration of bone and osteogenic sarcomas even after single exposures.

This current study reveals effects on various parts of the skeleton following x irradiation at the various stages of development from 0.0 to 18 days. The major effects follow exposure on days 11 through 15. While there is an overall effect, resulting in generalized but topographically normal stunting there are certain bones which are more drastically affected than others. The exposure to 100 r x rays is not normally within the diagnostic range (e.g. fluoroscopy) but it can occur in special and accident cases. It is far below the LD 50/30 level of 630 roentgens for the mouse or 500 roentgens for the human.

CONCLUSIONS

1. A total of 319 timed pregnancies in CFI mice provided the material for this study to determine the effect of 100 r x-rays delivered at each of the gestation periods from 0.0 to 18.0 days. The major

part of this study dealt with the skeleton and stunting.

2. The skeletal study was made on only those mice which survived to four months of age thus representing the maximum or optimum development of the skeleton following developmental x irradiation.

3. The greatest reduction in litter size followed 100 r on day 0.0 or immediately after fertilization. The exposure to 100 r on gestation days 3, 4, 10 and 13 caused such severe congenital anomalies that the mothers killed and ate more than 10% of the live-delivered fetuses.

4. The exposure to 100 r did not alter appreciably the sex ratio of mice delivered (53% males and 47% females) nor the ratio of those dying within the first 30 post natal days. In this latter group the highest mortality occurred among those x rayed on days 3, 4, 9, 10, 12 and 14.

5. The highest incidence of congenital anomalies seen at birth occurred following 100 r delivered on day 8.0. This is the time of onset of neurogenesis, but not of osteogenesis which is not active until about day 15.

6. Male mice of the CFI strain are always heavier than the females at four months of age. Exposure of the developing mouse to 100 r reduced the overall average weight of the survivors at four months by about 2.5 gm for each sex. There were statistically significant reductions in average body weights of males following exposure on gestation days 5 and 9 through 18 with the greatest reduction following exposure on days 1-14. For the females weight reductions occurred following exposures on days 8 through 18, with the greatest effects on days 11-14. Thus stunting is a more likely sequel of embryonic x irradiation when it occurs during the second half of gestation, after organogenesis has begun.

7. For the skeletal data 1,005 mice were radiographed, and seven skeletal measurements taken and averaged. There were sex differences in skeletal stunting even when x-rayed before day 9. Where the differences were pronounced the female was the more adversely affected.

8. The statistical analysis of the skeletal development following 100 r at the various gestation stages showed that after

nine days the highest significance was obtained when the irradiation occurred on gestation days 11 through 13. Since the effects appear to be over-all, the mice exposed on these days were grossly stunted but appeared to be topographically normal.

Extrapolation of gestation age in days:
mouse — human

Mouse — Human	Mouse — Human	Mouse — Human
1	1	9
2	2	10
3	4	11
4	6	12
5	8	13
6	12	14
7	16	15
8	20	16

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Knezevic ('60) reported the presence of secretory granules in the perivascular connective tissue space and, also, within the cytoplasm of the endothelial cells in the rabbit.

In the present paper observations concerning the locations and form of secretory products in the adenohypophysis of the rabbit will be presented and the significance of the findings in relation to the possible mechanisms of release and transport of hormone containing material from parenchymal cells into the circulating blood will be discussed.

MATERIALS AND METHODS

Virgin estrous rabbits of the New Zealand white strain with an average weight of 2.5 to 3.5 kg were used. The animals were anesthetized with intravenous nembutal for removal of the calvaria. A lethal dose of nembutal was then administered and the hypophysis removed carefully divided in pieces of 1 to 2 mm and fixed in 1% osmium tetroxide dissolved in Clark's modification of White's saline (Clark '63). The elapsed time between death of the animal and immersion of the gland in fixative was two to three minutes. After one hour in fixative tissues were hydrated in alcohol and embedded in Epon 812 (Luft '61) or English Araldite (Richardson et al. '60). The sections were cut on a Porter Blum ultramicrotome model MT 1 stained with either lead hydroxide (Millonig '61) or uranyl acetate (Watson '58) and examined in RCA microscopes models EMU-3C and EMU-3G.

OBSERVATIONS

Extrusion of secretory granules. The majority of cells in the adenohypophysis of the rabbit contain granules which for each type of cell attain a typical maximum diameter. In the virgin estrous rabbit a few cells contain granules with a maximum diameter of 600 to 800 m μ . A great number of the cells contain granules of 300 to 400 m μ diameter. A moderate number of large cells contain granules with a diameter of 100 to 200 m μ . From comparisons by light and electron microscopes of adjacent sections it has been possible to identify cells containing granules of the 300 to 400 m μ size as well as

those with 600 to 800 m μ granules in acidophiles. The large cells with the 100 to 200 m μ diameter granules were classified as basophiles on the basis of their positive periodic-acid-Schiff reaction. In most cases it is possible to distinguish a smooth perigranular membrane surrounding the dense granule. In acidophiles the perigranular membrane is very closely applied to the mature granules while in the basophiles it is usually separated by a more noticeable interval from the granules (figs. 1-4). Most of the acidophile cells seen are packed with granules (fig. 4) whereas in the basophiles the granules, although quite numerous, are usually more widely separated (fig. 1). In sparsely granulated cells the granules are frequently found lined up very near the plasma membrane (fig. 8). This condition is not limited to that part of the cell adjacent to the basement membrane but is seen around the entire periphery. The smooth perigranular membrane is sometimes seen to be in contact with the plasma membrane (fig. 1).

Granules are seen lying in shallow depressions between the plasma membrane and the parenchymal basement membrane (figs. 1-2). The latter is often deformed to follow the contour of the granule (fig. 1). In this location the perigranular membrane is usually but not invariably absent, suggesting that it becomes continuous with the plasma membrane in the process of discharge. The finding of extruded granules is not confined to the basal part of the cells but has also been observed in large and small spaces between adjacent cells (figs. 3-4). These intercellular spaces into which cilia and cytoplasmic projections often protrude are continuous with the space between the parenchymal cell membrane and the basement membrane adjacent to it (fig. 4). The granules found in the intercellular spaces are frequently seen enclosed within a perigranular membrane. In some instances a small but distinct rim of cytoplasm is observed surrounding the individual granules (fig. 4), suggesting that the granules are contained in either projections from cells outside the plane of section or that they are contained in projections that have been pinched off. The latter possibility appears the more likely inasmuch as the granules

observed have a symmetrical rim and projections containing granules have been seen cut in longitudinal section.

Parenchymal cells in perivascular space as reported in the rat by Rinehart and Farquhar ('55) and Lever and Peterson ('60) processes or portions of parenchymal cells are also sometimes seen in the perivascular space in the rabbit (fig. 9). They are not surrounded by basement membrane but rather appear to have discontinuous strands of basement membrane material attached to them. The site of penetration of the process through the parenchymal basement membrane has not been observed although the portion of the cell on each side has an identical appearance. Immediately outside the plasma membrane of some of the processes granules are seen lying free in the perivascular space. These granules are identical with those inside the process and those in the nearby parenchymal cell (fig. 9). Contrary to the findings of Lever and Peterson ('60) no granules found free in the perivascular space retain their perigranular membrane.

Fate of extracellular granules Although the secretory granules have not been found in actual passage through the parenchymal basement membrane they must in some manner cross this barrier for it is not uncommon to see granules in perivascular space i.e., between the parenchymal and endothelial basement membranes (figs. 5, 6, 9). It is of interest to note that all the granules we have found lying free in this location were surrounded by a perigranular membrane.

Electron-dense granules have been observed within the thicker portions of the endothelial cells of capillaries in the adenohypophysis (fig. 7). These granules have a perigranular membrane and are of the same size and appearance as those seen in adjacent parenchymal cells. Granules indistinguishable from those of pituitary cells or those in the endothelial cells have also been observed in the lumen of the capillaries (figs. 8, 10). In such cases most of the granules had a distinct perigranular membrane and lie in close proximity to small projections or microvilli of the endothelial cytoplasm (figs. 8, 10).

The endothelium of the capillaries of the anterior hypophysis is very thin and

fenestrated in most places. The openings do not appear to be complete but are bridged by a very thin membrane (figs. 2, 8, 12, 13). In other regions the endothelium is thicker and contains numerous pinocytotic vesicles of various sizes; some are large and surrounded by a continuous rim of endothelial cytoplasm (fig. 11) while others are surrounded by a fenestrated layer (figs. 12, 13). The material contained within these vesicles resembles more closely the material occupying the perivascular space than the plasma within the capillary lumen.

DISCUSSION

The process of secretion in an endocrine gland such as the adenohypophysis involves not only synthesis, consolidation, storage and release of the hormones by the cells but also requires that the released secretory products find their way into the circulatory system. All of these steps in the secretory process of the anterior hypophysis save the last, have been studied by many investigators (Farquhar et al., '54a, b; '57; '61a,b; Green and Van Breezen, '55; Rinehart and Farquhar '55; Ichikawa, '59; Lever and Peterson, '60; Yamada and Sano '60; Lobblich and Knezevic '60; Sano '62; Schellin, '62; Garwood and Latta, '63) in various species. The formation and release of secretory products are well documented but the evidence bearing on the problem of passage of these products into the circulation has been lacking.

One mechanism for release of secretory products from the pituitary cells has been reported in the rat by Farquhar ('61a) Ichikawa ('59) Lever and Peterson ('60) in the mouse by Sano ('62) and in the rabbit by Lobblich and Knezevic ('60). This is a merocrine type of release in which the perigranular membrane comes into contact with the internal surface of the parenchymal plasma membrane and fuses. An aperture forms at the site of fusion so that the perigranular membrane then becomes the cell membrane and the naked granule is released into the extracellular space. This has come to be considered by many as the only mechanism of hormone release in the anterior pituitary; however the observations presented

here lead us to postulate that an additional mechanism occurs in the secretory activity of this gland. This mechanism is tentatively called a microapocrine type of secretory release in which small blebs of cytoplasm containing secretory granules are pinched off from parenchymal cells into the intercellular spaces. Small projections containing granules protruding into intercellular spaces, granules surrounded by a narrow rim of cytoplasm lying in the same spaces and granules surrounded only by a perigranular membrane found in this and other extracellular sites are evidence in support of this mechanism. The small blebs of cytoplasm released in this way may dissolve in the extracellular space and thus liberate the contained secretory granules enveloped by the perigranular membrane. Further supporting evidence is given by the fact that in sections showing such free granules the integrity of the parenchymal cells was maintained and no signs of disruption or cell damage were apparent. A study of serial sections should provide additional information relative to this particular question.

The observation of processes of parenchymal cells extended through the basement membrane into the perivascular space was first made in the rat by Rinehart and Farquhar ('55) and Lever and Peterson ('60) showed in the same species such processes in which many secretory granules were being discharged by the microcrine process. Although these observations have not been confirmed in the mouse (Yamada and Sano '60) or in the human (Schellin '62) our findings indicate that it does occur in the rabbit (fig. 9). The release of secretory products directly into the perivascular space could well be the mechanism by which the pituitary reacts to situations requiring sudden changes in hormone concentration in the blood. It has not been possible to trace the processes far enough to determine whether they are detached portions of cells or simply a process which has extended through the basement membrane to discharge its granules.

Once liberated from the parenchymal cells the secretory products must reach the blood stream in order to have an effect on

the distant target organs. Although no concrete evidence exists accounting for the movement of dissolved materials, a concentration gradient presumably exists which would establish and facilitate the direction of diffusion of hormones through the basement membranes, the ground substance in the perivascular space and across the tenuous membrane bridging the fenestrae of the endothelium. Rinehart and Farquhar ('55) and Farquhar ('61) demonstrated pinocytotic vesicles in the thicker portions of the endothelium and suggested that in such places there is an active transport of dissolved substances across the endothelial wall. Our observations that large pinocytotic vesicles in the endothelium (figs. 11-13) contain material which resembles the ground substance of the perivascular space rather than the plasma in the capillary lumen supports the theory that hormones may be transported by pinocytosis from the perivascular space into the circulation.

The fact that we have observed membrane-bound granules indistinguishable from those in the epithelial cells lying in the intercellular spaces in the perivascular space within the cytoplasm of endothelial cells as well as in the lumen of capillaries indicates that movement of intact secretory granules toward the circulating blood does occur. We can theorize that the motive force which transports the granules on their extracellular course might be provided by the movements of the parenchymal cells which change the shape and extent of the intercellular spaces, perhaps aided by the action of cilia that are often found protruding into these spaces (fig. 3). Although the basement membranes have been considered to be the principal barrier to diffusion we have observed a few times an appearance suggesting that intact granules can cross them. We have confirmed the report by Farquhar ('61b) that electron-dense granules having perigranular membranes are sometimes seen within the thicker portions of endothelial cells (fig. 7). Were it not for finding smaller granules in the perivascular spaces as well as in the lumen of the capillaries, we would presume that the granules in the endothelial cells have a different origin.

from those of the parenchymal cells. However as we have indicated above the granules found in the capillary lumen present the same morphological characteristics, i.e., distinct perigranular membrane size and electron density as those seen in other intra- and extra-cellular locations. In addition, the fact that they are frequently found in the vicinity of cytoplasmic projections of endothelial cells (figs. 8-10) strongly suggests that they have just been discharged. Löblich and Knezevic ('60) while not presenting photographic evidence, suggested that intact granules could be actively transported across the endothelial cytoplasm in the rabbit adenohypophysis. In the present study it has been possible by systematic survey at high magnification of every capillary visible in each section, to accumulate sufficient data to warrant proposal of the theory of active transport of intact secretory granules as well as dissolved hormone-containing material into the circulation.

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Abbreviation

CL, Capillary lumen
E, Endothelium
EB Endothelial basement membrane
IS Intercellular space
PB Parenchymal basement membrane
PS Perivascular space

PLATE I

EXPLANATION OF FIGURES

- 1 Portion of basophil in the process of discharging three secretory granules (arrows). The liberated granules, without perigranular membranes, lie between the plasma membrane and the parenchymal basement membrane. A distinct perigranular membrane surrounds the granules within the cytoplasm. $\times 37,800$.
- 2 A basophilic granule (arrow) lying in an irregular depression of plasma membrane has not undergone any noticeable dissolution. The nature of the structures intervening between the extruded granule and the capillary lumen can be observed. $\times 25,200$.

RELEASE AND TRANSPORT IN HYPOPHYSES

Kerns and Salzman and Roy R. Peterson

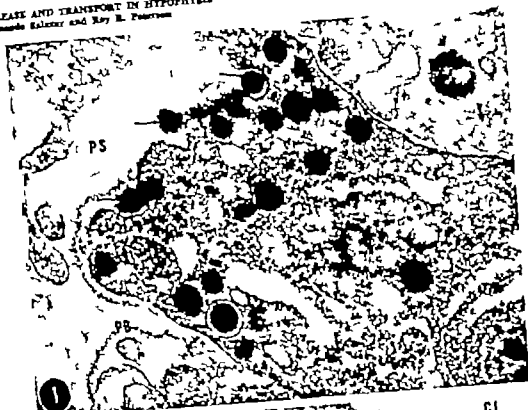


PLATE 2

EXPLANATION OF FIGURE 1

- 3 A free membrane bound acidophile granule (arrow) and several cytoplasmic processes occupy an intercellular space along with cilia protruding from parenchymal cell. $\times 7,000$
- 4 A acidophile on the left and basophile on the right bound an intercellular space in which two secretory granules are seen, each surrounded by a thin rim of cytoplasm. The intercellular space is continuous at the arrow with the space between the parenchymal cell and the adjacent basement membrane. $\times 8,500$

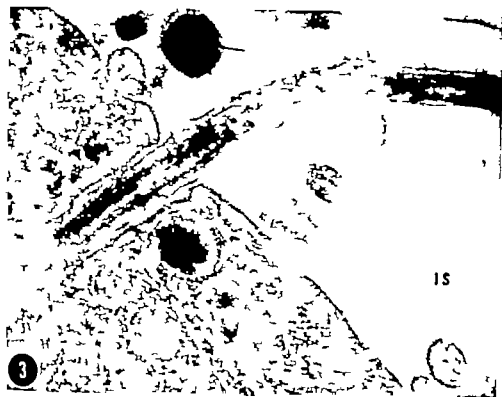


PLATE 4

EXPLANATION OF FIGURE

1. Two intact granules (arrows) having similar characteristics to those in the basophil at the upper left, can be observed lying free in the lumen of the capillary. The typical fenestrated and thick portions of the endothelium are demonstrated. A prominent nucleus and occasional pinocytotic vesicles can be seen in the thick portions. Note the cytoplasmic projection or microvillus near the free granule on the left. $\times 30,000$



PLATE 5

EXPLANATION OF FIGURES

- 9 Processes of basophile (arrow) lying in the perivascular space. They have the same morphology as the basophile seen in the lower right. The processes are not surrounded by basement membrane although some intermittent strands of basement membrane can be detected. Some of the granules (circles) appear to have been liberated. $\times 19,000$
- 10 A secretory granule which is of the same size and density as those in the nearby acidophile lies free in the lumen of capillary. A microvillus (arrow) projects from the endothelial cell near the granule. $\times 37,800$.
- 11 A large vesicle projecting into the capillary lumen appears to have small vesicle (arrow) coalescing with it. The large vesicle has a continuous rim of endothelial cytoplasm surrounding it. The contents more closely resembles the material in the perivascular space than it does that in the capillary lumen. $\times 38,200$.

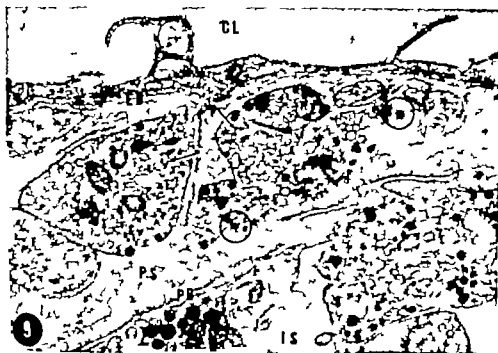
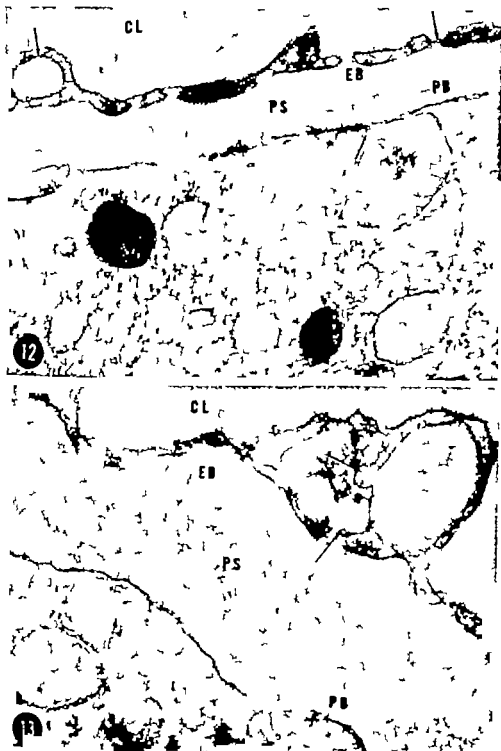


PLATE 6

EXPLANATION OF FIGURES

- 12 A vesicle surrounded by the fenestrated endothelium contains dense material. Note that the fenestrae are bridged by membrane (arrow) / 51,000
- 13 Small vesicles in the endothelial wall appear to be fusing with and/or adhering to the large vesicle which is enclosed in part by fenestrated endothelium. The material within the large vesicle has the same appearance that in the perivascular space 39,000.



or simple immersion of whole opened atria or large pieces of ventricle in 0.005% methylene blue in saline adjusted to pH 3.6. In many cases heart tissue was treated first by perfusion and then dissected pieces of the perfused heart immersed. Additional immersion solution was occasionally injected with a syringe and small needle beneath the epi- or endocardium. Following perfusion and/or immersion various portions of the heart such as the entire opened right or left atrium, the interatrial septum or selected areas of the ventricles were aired and then fixed in 8% ammonium molybdate. Following fixation the tissues were thoroughly washed, dehydrated with alcohol and finally cleared and studied in benzyl benzoate.

The advantage of tissues prepared for study in this manner is that one may focus through the entire thickness of the atrial walls or through a several millimeter thick portion of the ventricular wall and easily determine the relative disposition of various types of nerve end formations.

OBSERVATIONS

Classification of nerve endings

Before describing the types of sensory endings found in various parts of the heart, it is necessary to describe briefly and compare the types of sensory endings found in somatic and vascular tissues. In such tissues as the skin, fasciae, aponeuroses, tendons, ligaments, joint capsules and periosteum three basic types of sensory nerve endings are usually found (Miller and Kasahara, '59a, '59b, '63; Ralston et al. '60; Miller et al. '58, '60). These may arbitrarily and simply be divided into: 1. Free fiber endings which are little branched or unbranched terminations of small myelinated or unmyelinated fibers. 2. Complex unencapsulated endings resulting from the repeated branching of terminal fibers and which are distinctly discrete but unencapsulated structures (e.g. Ruffini, Ruffini-like or Golgi-type endings). 3. Encapsulated endings, characteristically discrete and surrounded by a capsule of modified Schwann cells or connective tissue elements (e.g. Meissner's corpuscles, Krause end bulbs, Golgi-Mazzoni ends or the various sized Vater-Pacinian corpuscles).

In blood vessels small myelinated fibers may terminate in sensory endings of the free fiber type, or the dendrites of one or several fibers may anastomose to form an end net. The end-net may well be the most abundant type of vascular sensory element, but it is difficult to identify because of its remarkable morphological similarity to the autonomic motor plexus. Unless experimental nerve root sections are performed (Polley '55) or special histochemical techniques are used differentiation of the sensory and motor elements in blood vessels is very difficult.

Apart from such specialized areas as the aortic arch, carotid sinus, pulmonary artery and origin of the renal arteries, complex unencapsulated endings (baroreceptors) are rarely found in blood vessels.

Encapsulated endings of the Vater-Pacinian type are found in the walls of the larger veins.

The sensory nerve endings found in the heart are: 1. end-nets, 2. complex unencapsulated endings and 3. encapsulated endings.

The end-net (fig. 12) is formed by the anastomoses of the branched dendrites of several apparently different myelinated fibers. It is a prominent and constant feature of the entire endocardium. Since free fiber endings seem to be absent from cardiac tissue the end-net may either represent free fiber endings in the heart, or be a sensory element peculiar to vascular tissue.

It should be pointed out that the end-net nerve terminals are not usually demonstrable with heavy metal techniques, and therefore workers such as Chabarov (37) and Nonidez (39) do not explicitly describe these nerve endings. Holmes (37), however, was able to demonstrate these endings with both methylene blue and silver techniques. Workers with methylene blue on the other hand, have consistently described indicated or pictured these structures (Michailow '08; Meyling, 51; Woollard, '26; Mitchell, '56).

Complex unencapsulated endings in the heart are referred to in the literature as diffuse or compact type nerve endings. Endings of moderate sized myelinated fibers which are much branched and occupy a considerable area may be termed diffuse

of complex unencapsulated endings.

ly large or large myelinated bers arise more spatially circumscribed of varying size and form. These may be termed compact types of complex unencapsulated endings. Intermediate or forms are always found, which emphasizes the artificiality of this or any other classification.

Encapsulated endings are compact, circumscribed nerve end formations that are surrounded by a definite connective tissue capsule. Such endings are exceedingly common in many tissues, but with the exception of the horse (Michailow '08) are rare in the hearts of mammals thus far described.

Epicardium

Atria. In our experience, the atrial epicardium as compared to the endocardium is only sparsely supplied with sensory nerve endings. We have observed both diffuse and compact types of complex unencapsulated endings in the substance of the epicardial connective tissue (figs. 1, 2, 4 and 6). Occasionally an end-net like formation was seen lying just above the outer surface of the myocardium but it was not certain whether this was a sensory end-net or merely part of the general epicardial nerve plexus. The relative sparsity of sensory endings in the epicardium was surprising to us as Dogiel (1898) and more recent Russian workers (Chabarowa, '59) state that these endings are very abundant in the epicardium. In our entire series of over 75 animals however we found not even one specimen to be richly supplied with epicardial sensory endings.

Area of sinu-atrial node. Immediately surrounding the sinu-atrial node and elsewhere in the substance of the atrial epicardium are various sized groups of ganglion cells. With methylene blue some of the nerve cell bodies of these ganglia stain well, while the satellite cells surrounding prevent the cell body from staining. The synaptic contacts between pre- and post-ganglionic neurones is well visualized in these areas. In no case did we ever see a sensory fiber ending on the pericapsular apparatus of cardiac ganglion cells. Sensory fibers ending on cardiac ganglion cells

have been described by some Russian workers (Khabarova, '62).

With our technique we were not able to demonstrate nerve fibers terminating within the nodal tissue. Recently Torii ('62) with the electron microscope has beautifully and unequivocally demonstrated nerve terminals ending in relation to elements within the nodal tissue.

Ventricles. As in the atrial epicardium a wide variety of both diffuse and compact types of complex unencapsulated endings were encountered (figs. 7-11). End-nets were generally absent from the epicardium proper but were characteristic of the coronary vasculature. Differentiation of motor and sensory end-nets in smooth muscle areas is difficult without experimental nerve root sections.

Myocardium

Bundles of mixed myelinated and unmyelinated nerves follow connective tissue septa between muscle bundles and ultimately extend to the endocardium. With our technique we were unable to demonstrate sensory terminals ending about myocardial muscle fibers. Occasionally however unmyelinated fibers course directly over myocardial muscle fibers in both the atria and ventricles and these are presumably the motor terminations of post-ganglionic sympathetic nerves (figs. 34-36).

Endocardium

Atria. The atrial endocardium is richly innervated. End-nets and diffuse and compact varieties of complex unencapsulated sensory endings occur profusely in this region. Certain locations are more abundantly and consistently well innervated than others; these are the areas about the entrance of the inferior vena cava into the right atrium, the opening of the pulmonary veins into the left atrium, and the bases of the interatrial septum.

All three varieties of nerve endings (end-net, diffuse and compact) may occur in the same location, or each type may occur separately. The end-nets frequently arise from variously sized myelinated fibers (fig. 12). It appeared to us that the end-net structure arose from the anastomosed dendrites of several (two to six or even more) nerve fibers (fig. 12). As far as one

is able to determine with the light microscope the branching ends of several fibers anastomose with one another. Michallos (1938) observed and described precisely this phenomenon in the horse atrial endocardium and pointed out that while the end-net might appear to originate from several different fibers in reality the apparent fibers of origin might be collaterals of a single parent fiber branching at a higher level. The end-nets were seen most frequently on the posterior and inferior aspects of the atrial endocardium as well as on the interatrial septum.

In some areas the end-nets may be the only elements present (fig. 12) but more frequently occur together with complex unencapsulated endings (fig. 14).

The most characteristic feature of the atrial endocardium is the wealth and variety of complex unencapsulated sensory nerve endings varying in form from diffuse rambling structures to discrete compact elements (figs. 13-26). Morphologically these endings are the homologues of stretch receptors in other types of tissue and in the heart are termed baroreceptors by the physiologists.

While these endings may be encountered almost anywhere in the atrial endocardium they are most abundant in the areas about the openings of the great vessels and on the interatrial septum. They are rare or absent in the auricular endocardium.

The nature and variety of these type endings can best be appreciated from the photographs (figs. 13-26). Here it is apparent that in all four mammalian species represented the same basic types of structures are present, but in each species the endings have a slightly different appearance. While it is difficult to describe these species differences, the terminal structures of the dog and monkey appear a little more coarse and less delicate than those of the cat and lamb. After one has studied a sufficient number of specimens from a particular species, it is possible to recognize the species by the appearance of the sensory terminals.

The diffuse type of endings arise from fibers approximately 4 to 6 μ in diameter and the branches and ramifications of one fiber may occupy an area of several square

millimeters. There are no anastomoses between the terminal branches of different nerve fibers.

Fibers giving rise to the large complex endings are usually the largest found in the heart and range from 8 to 14 μ in diameter. The terminal apparatus from these fibers vary in size from 50 to 350 μ^2 . The approximate number of these large discrete endings ranges from 100 to 300 in the endocardium of the dog.

Ventricles The ventricular endocardium (apart from the valvular endocardium) is much different from the atrial that only end-nets and no other type of sensory endings have been observed in the ventricular endocardium. There is a rich nervous plexus (figs. 27-29). Most of the myelinated fibers in this plexus give rise to sensory end-nets. No particular association of sensory end-nets with the Purkinje bundles was noted although in the lamb where the bundles are more superficially located there are abundant overlying nerve fibers (fig. 28).

Valves

The endocardium of both surfaces of the leaflets of the mitral and tricuspid valves are well endowed with endings and occasional complex endings (figs. 30-33). The aortic and pulmonary valve leaflets show only infrequent patches of end-nets. From the tricuspid and mitral valve leaflets nerve fibers course over the chordae tendineae.

Pulmonary artery and aortic arch

While this study was not primarily concerned with these structures, excellent photographs of the sensory nerve endings in these interesting areas were obtained and are included here.

In the adventitia of the base of the pulmonary artery and the inferior aspect of the aortic arch (figs. 37-41) there are numerous end-nets and large complex unencapsulated endings. These have been thoroughly described and illustrated in the extensive studies of Abraham (1935, '36, '61).

DISCUSSION

After a century of morphological study of the intrinsic innervation of the heart

a more complete picture is emerging. From 1860 to 1890 the emphasis was primarily on the nature of the motor endings on myocardial muscle fibers. With the advent of methylene blue in the 1880's attention was directed more to the sensory innervation. From the 1890's to the present, many authors have described a variety of sensory nerve endings in the heart.

An excellent historical summary of the motor innervation of cardiac muscle is given in the papers of Berkeley (1895) and Smirnow ('00). The consensus in the 1890's was that in many myocardial areas, but not all, the muscle is innervated by simple unbranched or few branched endings of myelinated nerve fibers which are in intimate direct contact with the muscle fiber. Little was added to our knowledge of myocardial muscle innervation until the recent ultrastructural studies of Fawcett and Selby ('59) and Virágh and Porte ('61). The electron micrographs corroborated the earlier viewpoint that myocardial muscle fibers are innervated by simple branched or unbranched terminal of unmyelinated nerve fibers much in the same way as the smooth muscle of blood vessels or visceral structures is innervated. Whether these endings in the heart muscle are the terminal branches of sympathetic or parasympathetic nerve fibers remains undetermined, although the supposition is that they represent the terminals of postganglionic sympathetic fibers. Neither sufficient nor appropriate histochemical studies, nor observations following successful total heart sympathectomies or parasympathectomies have been carried out to resolve this problem.

A host of Russian workers (Khabarova, '62) have described sensory nerve endings associated with the intrinsic cardiac ganglia, but this concept is far from generally accepted and its significance unclear. Our preparations show numerous synapses within the cardiac ganglia, but nothing to suggest the endings of sensory fibers.

Goertler ('61) and others feel that the bundles of Purkinje fibers coursing down the interventricular septum are covered by sensory elements that are specifically related to the conduction fibers. While we have observed this apparent relationship in the lamb heart, we conclude that the

sensory endings are not necessarily functionally related to the conduction fibers, but are rather a part of the general endocardial sensory apparatus.

There is little doubt that both the epicardium and endocardium are well supplied with sensory nerve endings. The majority of the sensory endings in the epicardium are complex unencapsulated in nature. These are remarkably similar in structure to the same type of endings that occur in the dermis, fasciae, aponeuroses, tendons, joint capsules, or periosteum. In the heart, as in other tissues these endings are probably associated with the function of denoting change in tissue position or a change in the degree of tension or stretch existing in the tissue. Such receptors are termed "stretch receptors" in most of the body but referred to as baroreceptors in the heart.

Dogiel, in his early classical article of 1898 presents beautiful drawings of complex unencapsulated endings. A multitude of Russian workers have since elaborated on the nature and disposition of these receptors. While the Russian workers state that the epicardial nerve endings are remarkably abundant, neither Woodlard nor we have been able to find these endings in great profusion. Regardless of their number they comprise the dominant epicardial sensory element.

The coronary vasculature is well endowed with both motor and sensory networks but without resort to special histochemical techniques and experimental dorsal and ventral root sections the nature and extent of the sensory network is difficult to ascertain.

The atrial endocardium is the most profusely innervated area of the heart. Nearly all workers since Smirnow (1895) and Berkeley (1895) have described a wealth of sensory nerve endings in this location. Virtually all students of cardiac innervation have described and illustrated a large variety of complex unencapsulated terminals varying from diffuse to compact in general form (Smirnow 1895 Berkeley 1895 Woodlard, '26; Nettleship '36 Nofnidez, '39 Holmes '57 '58 and many others). While numerous drawings of these endings have been published, very few good photographs have appeared in

print. Since interpretation plays a considerable role in neurohistology it is imperative that photographic evidence accompany descriptive accounts.

The end net formation so prominent in both the atrial and ventricular endocardium was first recognized and described by Michailow ('08) but largely overlooked until Holmes ('57-'58) clearly depicted it and emphasized its separateness from the diffuse and compact types of endings. It is interesting that the more recent Russian workers (Khabarova '62) fail to recognize this remarkable structure. Preoccupation with heavy metal technique explains in part the failure to visualize nerve terminals made up of very small sized fibers.

The fact that the end-net is derived from myelinated fibers and shows non-specific cholinesterase staining about the network fibers (Holmes '58) is indicative of its sensory nature. In almost every variety of sensory apparatus in the heart the terminal branches have been described ending in relation to specialized types of cells (Dogiel 1898 Khabarova '62). The demonstration of such elements depends in part on the particular technique used as well as on the interpretation of the observer. The ultimate solution of this problem awaits ultrastructural study similar to

of the interstitial cell problem in relation to smooth muscle motor innervation.

The central distribution of the various types of sensory nerve endings in the heart is only partially solved. Woollard ('26) Nettleship ('36) Nomidez ('39) Holmes ('57) and Chabarowa ('59) by means of differential vagal and sympathetic sections have described results indicating that the large complex unencapsulated endings found mostly in the atrial endocardium travel mainly with the vagus nerves and terminate in medullary centers. That some baroreceptors end in the upper thoracic spinal cord is maintained by Khabarova ('62). The central termination of the end-nets remains undetermined.

There is little doubt that the complex endings found in both the epi- and endocardium are stretch or baroreceptors. Thus these cardiac endings are both morphologically and functionally homologous to similar endings throughout the body.

Establishment of the true nature and function of the end-net endings await further investigation. Likewise the nature and disposition of fibers mediating pain from the heart remains undetermined.

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PLATE 1

EXPLANATION OF FIGURES

The nerve endings demonstrated in all figures were stained by methylene blue perfusion and/or immersion.

The straight black line at the bottom of each photograph represents 100 μ of distance.

In the explanation of figures "C.U.E." is the abbreviation for complex unencapsulated ending.

- 1 Dog. Right atrial epicardium. This is a diffuse type of C.U.E., and is very similar to endings often seen in the connective tissues of the capsules and ligaments about joints.
- 2 Monkey. Right atrial epicardium. A compact C.U.E. This type of formation is often seen in fascial structures.
- 3 Cat. Left ventricular epicardium. A compact C.U.E. This type of structure is very similar to the Ruffini ending found in the dermis of human glabrous skin.
- 4 Dog. Left atrial epicardium. A compact C.U.E.
- 5 Lamb. Left atrial epicardium. Similar to figure 4.
- 6 Cat. Left atrial epicardium. A compact C.U.E. Two spherical hook-like structures arise from the two branches of a single fiber.
- 7 Lamb. Left ventricular epicardium. A large diffuse type of C.U.E. Such structures are frequently seen in fasciae, aponeuroses, and periosteum.
- 8 Lamb. Left ventricular epicardium. A spread out, but basically compact type of C.U.E. This ending is characteristic of the Golgi-type endings found in retinacula and tendons.
- 9 Dog. Left ventricular epicardium (near the apical dimple). This is diffuse type of C.U.E.
- 10 Dog. Left ventricular epicardium near the atrio-ventricular junction. Compact C.U.E.
- 11 Cat. Left ventricular epicardium. Compact C.U.E.

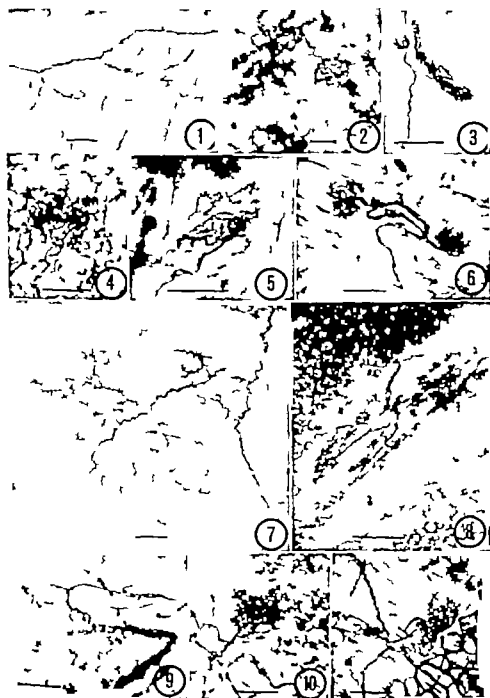


PLATE 3

EXPLANATION OF FIGURE

- 12 Dog. Right atrial endocardium. A end-net sensory terminal. Several small myelinated fibers are seen bifurcating to form a terminal end-net. The terminal branches of several fibers seem to fuse thus forming an anastomotic end-net.
- 13 Dog. Right atrial endocardium at the point of junction with the inferior vena cava. Diffuse C.U.E. All the terminal in this view emanate from a single parent fiber. The terminal of separate fibers never anastomose in this type of ending.
- 14 Dog. Right atrial endocardium. The network in the background is an end-net. The larger more heavily stained fiber entering the upper left part of the field is seen supplying a compact C.U.E.
- 15 Monkey. Right atrial endocardium. A very fine fibered diffuse C.U.E.
- 16 Dog. Right atrial endocardium in the vicinity of the inferior vena cava. Diffuse types of C.U.E.
- 17 Lamb. Right atrial endocardium. Diffuse C.U.E. the individual terminal of which are longate and tending toward compaction.

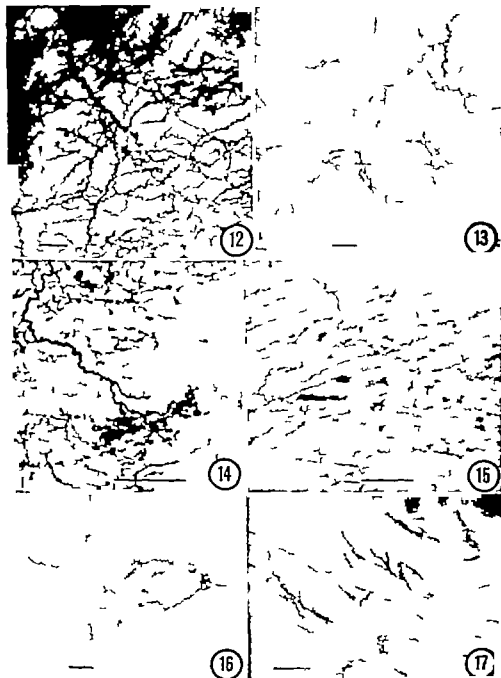


PLATE 3

EXPLANATION FIGURES

- 18 Cat. Left trial endocardium. Diffuse C.U.E. with individual terminals tending toward compaction
- 19 Cat. Right trial endocardium. Diffuse C.U.E.
- 20 Lamb Right trial endocardium. Diffuse C.U.E.
- 21 Monkey Left trial endocardium. Diffuse C.U.E.
- 22 Dog. Left trial endocardium. Compact C.U.E.
- 23 Monkey Left trial endocardium. Compact C.U.E.
- 24 Lamb. Left trial endocardium. Compact C.U.E.
- 25 Cat. Right trial endocardium near inferior ven. cava. Compact C.U.E.
- 26 Cat. Left trial endocardium near entrance of pulmonary vein. Compact C.U.E.

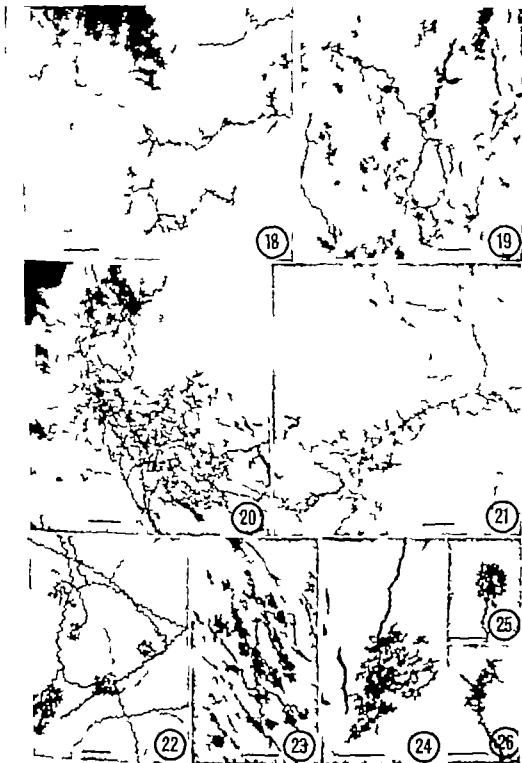


PLATE 4

EXPLANATION OF FIGURES

- 27 Cat. Endocardium of the right side of the Interventricular septum. Sensory end-net in the ventricular endocardium.
- 28 Lamb. Endocardium of the left Interventricular septum. In this view one sees really the sub-endocardial plexus but some of the fibers form sensory end-nets.
- 29 Monkey. Endocardium of right Interventricular septum. Sensory end-net.
- 30 Monkey. Mitral valve. Sensory end-net.
- 31 Cat. Mitral valve. C.U.E.
- 32 Monkey. Tricuspid valve. Sensory end-net.
- 33 Lamb. Tricuspid valve. C.U.E.

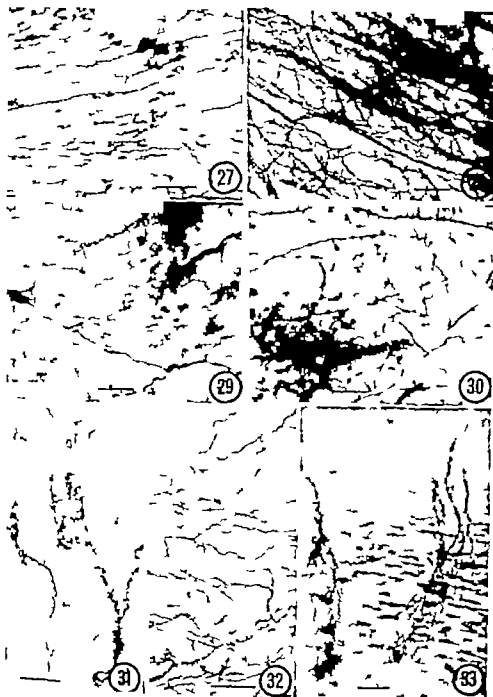
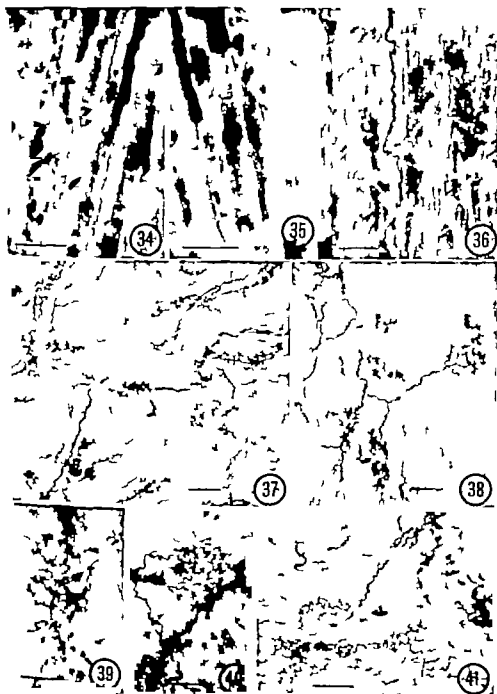


PLATE 5

EXPLANATION OF FIGURES

- 34-35 Dog. Left atrial myocardium. Several thin "beaded" unmyelinated fibers are seen running across and parallel to the myocardial muscle fibers. The areas of intimate contact between the nerve and muscle fibers represent synaptic points and are multiple ("synapses en passant"). These relationships have been verified by ultrastructural studies (see discussion).
- 36 Monkey. Left ventricular myocardium. Same as 34 and 35.
- 37 Cat. Aortic arch. Several C.U.E. in the adventitia of the inferior aspect of the aortic arch.
- 38 Lamb. Aortic arch. Same as 37.
- 39 Monkey. Aortic arch. Same as 37.
- 40-41 Dog. Aortic arch. Same as 37.



Cyclic Changes of Interstitial Gland Tissue of the Human Ovary¹

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ABSTRACT Three distinct types of gland cells occur in adult human ovaries and those of other mammals. These are: (1) Interstitial gland cells formed from the theca interna cells of degenerating (atretic) follicles, hence present from infancy to old age; (2) Thecal gland cells formed from the theca interna cells of ripening follicles, hence present only in individuals that are sexually mature or nearly so, and in these only at or near the time of ovulation; (3) Luteal cells formed from the granulosa cells of ovulated follicles and from the undifferentiated stroma cells surrounding these, and in certain species also from the same sources in relation to atretic follicles. These latter are the so-called accessory corpora lutea. Primary and accessory corpora lutea are present normally only after ovulation occurs and appear to function for a relatively short time unless pregnancy ensues. In certain species other types of gland cells occur in the ovary and mesovarium; these include the paraluteal cells of the human ovary. Paraluteal cells are not persistent thecal gland cells, but are differentiated from surrounding stroma after the thecal gland disappears. They are probably intermediate stages in the differentiation of luteal cells from stroma cells. Planimetric measurements and computations made from serial sections of human ovaries indicate that in non-pregnancy and early pregnancy the volume of interstitial gland tissue is less than 1% of the total ovarian volume. However, in the last trimester of gestation, the relative amount of interstitial gland tissue increases rapidly to roughly from 4% to 8% of the total ovarian volume. The largest amount in our series was 8.6%. Luteal gland tissue at the height of its development in the first trimester of gestation reached 31% of the total ovarian volume. In human ovaries the cells of the interstitial gland tissue of late pregnancy seem to be consistently larger and to have more finely granular cytoplasm than those of early pregnancy or nonpregnancy. The literature shows that mammalian interstitial gland cells of comparable origin to the human cells discussed in this paper have the following characteristics which are known to be indicative of steroid secretors: Numerous birefringent, acetone soluble autofluorescent granules which react with sulphuric acid and are Schultz and Schiff positive; mitochondria with anastomosing tubular cristae; and smooth tubular endoplasmic reticulum. Physiological studies so far reported have indicated possible estrogen, androgen, and progesterone production by interstitial gland cells, but all of the evidence is too scanty indirect, and at times contradictory to be convincing. Since interstitial gland cells are present from birth to old age, and show cycles of abundance and differentiation correlated with the reproductive age and cycles, they may prove to be the most important ovarian gland cells when their function is fully understood.

The interstitial gland may be the most important gland of the human ovary. It is the first gland tissue to form being present, at least periodically in the human ovary from before birth (Fraenkel and Papanicolaou, '38; Potter '53) until well after the menopause. On the other hand, the thecal gland, an important source of estrogens, is apparently active only when a follicle is in the last few days of the ripening process, and the luteal gland is ordinarily formed from a ruptured follicle secreting progesterone in significant amounts during just a few days of the middle third of the menstrual cycle, or in the case of pregnancy for only the first two or three months of the gestation period.

There are several types of glandular tissue in human and other mammalian ovaries and in the adjacent mesovaria, which are usually classed as interstitial gland. (For a review of this matter see Brambell, '56.) However the type with which we are concerned in this paper is that which differentiates from the relatively embryonic tissue of the theca interna of degenerating large secondary follicles and degenerating vesicular (Graafian) follicles of all sizes, except those follicles which are essentially ripe before atresia.

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sets in. In these ripe or nearly ripe follicles the majority of the theca interna cells have already differentiated into functional thecal gland cells and have lost the pluripotentiality they possessed earlier; hence little or no interstitial gland tissue is produced by such follicles.

Because crops of vesicular follicles are produced and undergo atresia in rhythmic fashion, the amount and cytological differentiation of interstitial gland tissue is also rhythmic. Probably this is true even in infants and children.

Although known and described in the human ovary and in those of many other mammals for a century (Schrön 1863, Pfüger 1863) and called interstitial gland by Boulin's student Limon in 1901, the significance and importance of this gland has been generally overlooked by both anatomists and physiologists even by many of those who are especially concerned with the physiology of reproduction (Also see Boulin '02 and Limon '02-03). There are several reasons for this. Probably most important is the constant confusion as to what is meant by interstitial tissue and the failure to recognize it as a gland or to differentiate it from the thecal gland or corpus luteum. The term "interstitial" is itself unfortunate and inaccurate

a descriptive term when applied to the ovary connoting as it does merely something in the spaces between other presumably more vital elements. Many students of the ovary have failed to observe the differences between the interstitial gland cells of the theca interna of atretic follicles and the thecal gland cells of ripe follicles or have denied their existence entirely in certain species. For example McKay et al ('61) succeed in describing in detail the atresia of various sizes of human follicles without mentioning interstitial gland tissue although they show a clear example of it in their figures 27 and 28. Also Nelson and Greene ('53 and '58) speak of hyperplasia and hypertrophy or "luteinization" of the theca interna of atretic follicles but object to calling these cells interstitial gland cells. Obviously they do not distinguish clearly between what they call "luteinization" of the theca interna of a ripening follicle (actually thecal gland formation) and that of an atretic follicle

(Interstitial gland formation). Yet few who have made reasonably extensive comparative studies of ovaries fail to recognize the existence and distinctness of these types of ovarian glandular tissue. It is unfortunate that in some of the species most commonly studied the interstitial gland cells are relatively inconspicuous (pig) or perhaps somewhat difficult to distinguish from other gland cells in ordinary histological sections (rat).

Yet there is considerable morphological evidence of the steroid secreting nature of the type of mammalian interstitial gland cells with which we are dealing here, namely those that are derived from the theca interna of atretic follicles. Dempster and Bassett ('43) showed that the interstitial gland tissue of the rat contains substances giving the characteristic biochemical reactions of steroid hormones (birefringent crystals, autofluorescent, acetone-soluble keto-compounds, and steroid substances reacting with sulphuric acid). Claesson and Hillarp ('48) demonstrated Schultz positive sterols in the interstitial gland of the rat, guinea-pig, and rabbit. They could show no appreciable increase in sterol production by the interstitial gland at parturition in any of these species nor during the entire lactation period in rats and guinea pigs. Dawson and McCabe ('51) demonstrated in the infantile and juvenile rat ovary cellular inclusions in both the primary and secondary interstitial gland tissue which were osmophilic, sudanophilic, Schiff-positive, Schultz-positive, birefringent and acetone-soluble in formalin-fixed frozen sections. Renneke ('51) also showed that in the immature rat these cells reacted to hormonal manipulation of the pituitary-gonad axis as one would expect if the inclusions demonstrated by the histochemical methods were gonadal hormones or their direct precursors. Claesson, Diczfalusy, Hillarp and Hogberg ('48) had shown similar effects of gonadotropic stimulation on the lipids of the pregnant rabbit ovary. Deane ('52) concluded from histochemical studies on the rat during the estrous cycle that, "Stages of steroid formation are the theca interna of normal follicles, the granulosa of follicles becoming atretic at the time of ovulation, the corpora lutea, and the interstitial

tissue. Ben-Or ('63) concludes from similar studies on the mouse that the interstitial gland is the principal source of oestrogens.

Several electron microscopic studies have demonstrated that steroid secreting cells of the adrenal cortex, interstitial tissue of the testis and corpus luteum are characterized by an anastomosing, tubular smooth endoplasmic reticulum. Muta ('58) is, to our knowledge published the only such study of ovarian interstitial gland. Using the mouse ovary he also demonstrated in the interstitial cells the characteristic smooth endoplasmic reticulum of steroid secretors. Belt and Pease ('56) considered only the mitochondria of steroid secretors and mention that the interstitial cells of the rat ovary have mitochondria with characteristic tubular cristae, but that this feature is more pronounced in theca interna cells and even more marked in luteal cells.

Still it must be admitted that completely clear-cut physiological proof is lacking as to whether or not interstitial gland cells are actually hormone secretors, and certainly there is only a little direct evidence as to what their presumed endocrine product is. Falck ('59) presented evidence that in the rat it is an estrogen however Falck, Menander and Noranstedt ('62) obtained only androgen effects. Production of progesterone by interstitial tissue of the rabbit is strongly indicated by the work of Hilliard, Archbald and Sawyer ('63) who found that rabbit ovaries from which all corpora lutea and large follicles had been removed by cauterization released approximately as much total progesterone/hr/mg tissue as control ovaries with intact follicles. Yet Kilpatrick, Armstrong, and Greep ('62) showed that rabbits with apparently normal interstitial gland tissue but without corpora lutea, did not maintain a progestational endometrium. It must be pointed out, however that the latter data were derived incidentally from animals which had been or were being treated with gonadotrophins and which had also been hypophysectomized. Obvious \therefore it is still possible that the most significant product of ovarian interstitial gland may be neither estrogen, an androgen nor a progestin.

Anyone who takes the trouble to examine microscopically the ovaries of a variety of mammalian species must certainly be impressed by the universal presence of interstitial gland cells derived from the theca interna of degenerating vesicular follicles by the cyclic fluctuation in abundance of this tissue and by its typical endocrine gland characteristics in both cytology and vascularity. It is because of our conviction as to its importance as an endocrine tissue and because we feel strongly that it should be the subject of intense physiological investigation, that we have undertaken, not only to call attention again to its prominence in the human ovary but to attempt to show by quantitative methods that it occurs in significant amounts and that it undergoes a marked rhythm in abundance correlated with the pregnancy cycle.

We have chosen for study the pregnancy cycle rather than the menstrual cycle, because we have obtained reasonably normal ovaries from this period and because the size and development of the fetus is a fairly accurate method of determining the stage of gestation, whereas clinical records of menses are very unreliable criteria for the stages of the menstrual cycle. Endometrial characteristics can, of course be used for determining the stages of the cycle in nonpregnant women, if one knows that the cycles of the individual were normal at the time of death or removal of the genital tract, but usually this is uncertain, or else it is definitely known that the reproductive physiology was abnormal.

MATERIAL AND METHODS

The ovaries used in this study were removed surgically or during autopsies from two children and fourteen women. Four pairs were from patients with apparently normal ovarian cycles but for whom the exact phase of the cycle is unknown, and five pairs and two singles were from women in various stages of pregnancy two were from women who had de-

Specimen numbers 49, 51, and 110 were provided by our Department of Surgery and of Gynecology and Obstetrics, and were of great value because they could be fixed promptly. Numbers 101 and 102 were autopsy specimens given to us respectively by Dr. Gordon Wexley Jr. and by Dr. Michael A. Gross. The two specimens supplied by Dr. Michael A. Gross are the exception, especially of Dr. Galsbolter's, of the usual work. We wish to express our appreciation to all of these.

TABLE 1
Pertinent data on ovaries studied

Ovary number	Patient's age	Phase of cycle	Time before fixation	Fixative	Cause of death, or reason for oophorectomy
143	2 ½	nonpregnant	17 hours	10% F	brain tumor
121	7	nonpregnant	—	Baker's F	—
135	25	nonpregnant	—	AFA	myocardial failure
106	29	nonpregnant	12 hours	AFA	myocarditis
112	18	nonpregnant	3 hours	10% F	uremia and shock
125	38	nonpregnant	5 minutes	AFA	adenocarcinoma of breast
93	27	2 months	—	10% F	poliomyelitis
51	39	3 ½ months	5 minutes	10% F	hysterosalpingo-oophorectomy for breast malignancy
49	42	4 months	2 hours	Levi's	hysterosalpingo-oophorectomy for breast malignancy
80	43	4 ½ months	—	10% F	—
119	46	5 ½ months	immediate	AFA	hysterosalpingo-oophorectomy for breast malignancy
104	—	8 ½ months	—	10% F	—
96	21	8 ½ month	6 hours	Z+2% F	auto accident
131	—	term	1 ½ days	Baker's F	postpartum hemorrhage
142	25	term	10 hours	AFA	cerebral aneurysm
118	22	1 month postpartum	1 day	AFA	—

Small portion of each ovary removed by pathologist not included in our measurements.

livered within an hour or two of death and one was approximately one month post partum (table 1). None of these had a definite record of recent hormone therapy or of pathology of a type known to have gonadotropic effects, but for five individuals there was no clinical record available (table 1).

The ovaries were fixed in various solutions: alcohol-formol-acetic acid, 10% formalin, Baker's formalin or Levi's. They were stored in 70% alcohol and later dehydrated and cleared by the alcohol-cyclohexanone method, embedded in paraffin and sectioned serially. Every fiftieth section was mounted and stained with Groat's tetrachrome stain.

The sections were studied under the microscope and the significant interstitial

gland masses of each section were identified and roughly outlined on paper. Then, using an Edinger microprojector with these rough outlines as guides, the enlarged image of each section was projected onto paper at known magnification and the peripheral extent of the ovary as well as of each interstitial and luteal area was accurately outlined and then traced twice with a Keuffel and Esser Co. 423634 planimeter and the average of the two readings was used. The planimeter readings gave the area of each outline in cm^2 . These areas were plotted on mm graph paper. The abscissa represented the number of sections and the ordinate the area. A line was drawn connecting the tops of the ordinates and the area was then measured by the planimeter. The data for each portion

measured (whole ovary corpus luteum, and interstitial gland masses) were substituted in the following formula which gave the approximate volume of each. From these volumes the percentage volume of the interstitial tissue and luteal tissue in relation to the whole ovary and in relation to the volume of both ovaries together was computed. (For details of this method see Dorfald et al. 42.)

$$\text{Volume} = \frac{PTX}{M^2} \times 100 \text{ (mm}^3/\text{cm}^3) \times \frac{T}{1000}$$

P = planimeter reading of plotted areas

T = cm²/vertical cm of graph

X = number of sections/horizontal cm of graph

T = thickness of sections in micra

M = magnification factor

It is obvious that such measurements are accurate only in a relative sense and that much depends upon the judgment of the person tracing the outlines of the tissue masses. In order not to exaggerate the amount of gland tissue present, the outlines were drawn as nearly as possible just within the average boundaries of the interstitial and luteal tissue masses; all non-glandular core areas of atretic follicles and corpora lutea were measured and deducted from their total areas; and numerous atretic follicles having only scattered groups of interstitial gland cells around their periphery were not measured and therefore are also excluded from the totals. Hence, it is felt that the percentages given represent very conservative estimates of the active tissues actually present in these ovaries.

OBSERVATIONS

Table 2 and figure 1 present the quantitative data. The exact computed volumes are given because the error in measurement and computation is unknown. We did find that the volume of a fixed ovary as determined by the displacement method is reduced by about one-third when determined by the planimeter method after dehydration and sectioning. However except for some variation in methods of fixation, each ovary was subjected to the same treatment and therefore to the same error. It is believed that differences in the percentage volumes given are certainly significant when they are as great as they

are between early and late gestation specimens (table 2 and figs. 2 and 3). Probably they are not significant between the individuals having under 1% of interstitial gland tissue as the relative error must have been much greater where the amounts are so small.

Comparison of the absolute volumes and the percentages of interstitial gland tissue in relation to luteal tissue (table 2 and fig. 1) shows that the volume of interstitial gland often amounts to from one-third to one-half that of the luteal gland at its most functional state. Certainly this indicates that the interstitial gland is voluminous enough to have real functional significance.

Although our sample of ovaries is small, the low amount of interstitial gland in early pregnancy, the sharp rise in late pregnancy and the sudden drop just after delivery seems to represent a definite and consistent trend (fig. 2). However the erratic fluctuations in the amount of luteal gland in these same individuals (table 2 and fig. 1; also commented upon by Forleo '81) warns of the danger of giving too much weight to quantitative differences in small samples. Yet when one looks to the qualitative changes in the luteal tissue there is no doubt that there is a consistent rapid rise in cytological differentiation in the first few weeks of gestation and then a consistent gradual decline from the functional to a degenerating condition in late gestation. Obviously qualitative changes in luteal tissue are better correlated with its known physiology than are its quantitative fluctuations. For this reason we have paid considerable attention to the cytological nature of the interstitial gland cells in the different reproductive phases.

Contrary to what we have been led to expect from comparative studies human ovaries have a much greater percentage and greater absolute amount of interstitial gland tissue in late pregnancy than in the early months (figs. 1 and 2) and the cells differ cytologically from those of early gestation or of the non-pregnant woman (figs. 6, 7, 14 and 15). Since this tissue differentiates from the theca interna of degenerating follicles it should be most abundant during and just after the periods of greatest follicular atresia. To our knowl-

TABLE 2

Computed volumes in mm³ and percentage volumes of luteal and interstitial gland tissue

Identification number		Whole ovary	Luteal gland tissue		Interstitial gland tissue		
		mm ³	mm ³	%	mm ³	% each ovary	% total ovary
106	Right	1877	4	0.2	1.4	0.07	
	Left	2368	3	0.1	2.5	0.11	
	Total	4245	7		3.9		0.9
112	Right	1860	0	0	5.5	0.24	
	Left	1324	11	0.7	6.6	0.43	
	Total	3384	11		12.1		0.5
125	—	2089	116	5.5	10.3	0.49	
	—	2819	15	0.5	7.4	0.26	
	Total	4908	131		17.8		0.8
93	Right	801	0	0	2.0	0.24	
	Left	1129	356	31.5	3.0	0.27	
	Total	1930	356		5.0		0.5
51	Left	3727	210	5.4	17.0	0.45	
49	Right	1458	0	0	20.4	1.40	
	Left	3970	910	23.0	27.3	0.69	
	Total	5328	910		47.7		1.0
80	Right	3750	0	0	7.0	0.35	
	Left	3738	600	16.0	14.0	0.57	
	Total	6488	600		21.0		0.32
119	Right	2223	16	0.7	2.2	0.09	
	Left	3432	199	5.8	4.4	0.12	
	Total	5675	215		6.6		0.11
104	Right	1317	0	0	52	3.94	
96	Right	2257	0	0	134	5.95	
	Left	2810	548	19.5	109	3.86	
	Total	5067	548		243		0.5
131	Right	3937	519	13.2	163	4.14	
	Left	3330	0	0	232	6.97	
	Total	7267	519		395		0.53
142	Right	2977	130	4.4	118	3.96	
	Left	2382	0	0	183	7.68	
	Total	5359	130		301		0.56
118	Right	2506	0	0	1.3	0.05	
	Left	1943	0	0	1.6	0.08	
	Total	4449	0		2.9		0.06

edge in most mammalian species the maximum number of atretic follicles is present during late proestrus, estrus, and early post estrus, or early pregnancy if fertilization has occurred. In most mammals this is the period of the greatest abundance and greatest cytological differentiation of interstitial gland tissue. There is certainly much of this tissue in human ovaries during early pregnancy but it is strikingly more abundant late in gestation, which

indicates that an even greater wave of growth and atresia of follicles occurs during gestation, probably early in the third trimester.

In early pregnancy and in nonpregnancy the thickness of the zone of interstitial gland tissue around atretic follicles, although highly variable, appears to be somewhat greater than that of the theca interna of normal follicles of similar diameter (figs. 6, 7, and 11). The gland cells are

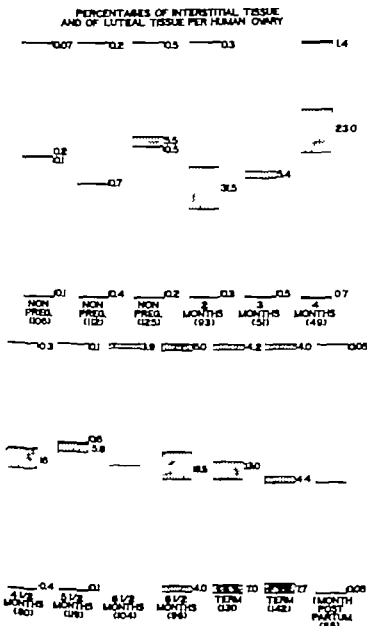


Fig. 1 With the exception of (51) and (104) each bar represents 100% of the total volume of a pair of ovaries. The heavy black transverse line near the middle of each bar divides it into an upper portion representing the percentage volume of the right and lower portion representing the percentage volume of the left ovary. (Only the left ovary of 51 was available and only the right of 104.) The percentage of the volume of the right ovary occupied by interstitial gland tissue is represented by the diagonally hatched area at the upper end of each bar and for the left ovary by similar area at the lower end. Likewise the percentage of each ovary occupied by luteal tissue is represented by crosshatched area at the central end of the portion representing the ovary in which the corpus was located. In several cases the percentages were too small to be represented this way but in all cases the numerical percentages are given at the right of the corresponding areas.

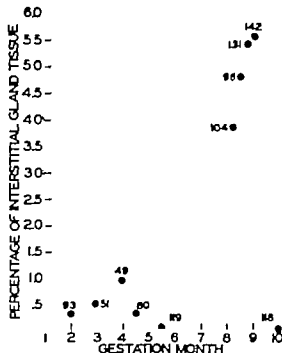


Fig. 2 The percentage of interstitial gland tissue in each pair of ovaries is plotted against the month of gestation, including the first post partum month. In the case of ovary 51 and 104 the percentage is based on only one ovary. The trend is obviously toward a marked increase in interstitial gland volume late in gestation.

grouped in short cords arranged in radiate fashion around the remnants of the follicular cavity. They are spheroidal and their cytoplasm appears relatively clear and unstained because of the presence of numerous coarse vacuoles the contents of which have disappeared during the technical procedures (figs. 6, 8 and 14). The cords are separated by capillaries and by fine strands of collagen (not clearly shown in the figures) which are most conspicuous at or near the outer and inner margins of the zones of interstitial gland cells.

The gland cells of later pregnancy are most numerous and best developed just before or at parturition (figs. 2, 13 and 15 to 19). They are also arranged in radiate cords around atretic follicles, but in general, form relatively thicker and more compact zones than in early pregnancy. In comparison with the interstitial gland cells observed in early gestation and non-pregnancy these cells are more often elongated or polyhedral but perhaps most no-

ticeable is their distinctly granular and relatively nonvacuolar cytoplasm (cf figs. 14 and 15). A month after parturition the outlines of atretic follicles could still be determined but the components of these areas were no different than the surrounding stromal cells of the cortex. Apparently human interstitial gland cells react to embryonic, inactive, fibroblast-like types as they seem to do in other mammals.

In the larger atretic follicles it was also difficult to distinguish between the degenerating theca and the interstitial gland tissue. In general degenerating theca cells have less vacuolar cytoplasm, are not arranged in radiate cords and are separated by negligible amounts of collagen. The granulosa may still be partially intact in these larger follicles. Interstitial gland tissue cells are smaller, have more lightly stained cytoplasm, are usually arranged in cords with collagen alternating with the cells. Many of the largest atretic follicles show little or no interstitial gland tissue (fig. 18).

There is no doubt that interstitial gland tissue develops around atretic follicles in infancy and childhood. Besides these at two and one-half and seven years illustrated in figures 3, 4 and 5, we have also seen it in small amounts in ovaries of an infant of 13 months and a child of three years. More ovaries of infants and prepubertal children should be studied to demonstrate more clearly whether it occurs in definite cycles and in what amount. We have also seen it in menopausal ovaries although in such small amount that attempts at quantitative measurements would seem unfruitful at present.

Two other cell types that are related or associated with interstitial gland cells were also observed; lutealized granulosa of atretic follicles and paraluteal cells.

Within several follicles surrounded by interstitial gland tissue parts of the granulosa had become lutealized (figs. 9 and 19). The remainder of the granulosa had usually sloughed and in many cases the lumen of the follicles had been obliterated. These masses of lutealized granulosa cells, usually known as the accessory corpus luteum, were found only in two pairs of ovaries — one at three months, and one at five and one-half months of gestation.

When accessory corpora lutea were distinct and sufficiently large they were measured, and the quantity was added to the total luteal volume computed for the respective ovary. The cells of accessory corpora lutea were always similar to those of the main corpus luteum of the same pair of ovaries, and were distinctly larger than and cytologically distinct from the interstitial gland cells enclosing them (figs. 9 and 10). These things are generally true of accessory corpora lutea of other mammals.

Paraluteal cells were observed in the infoldings and adjacent borders of the corpora lutea of most ovaries, even in one ovary at parturition. These cells resemble the interstitial gland cells in size and appearance (fig. 10). The outer cells of paraluteal masses often grade smoothly into the surrounding undifferentiated stroma cells. Likewise their innermost cells commonly include transitional types intergrading with true luteal cells.

DISCUSSION

We have demonstrated by a reliable quantitative method that there is a pronounced rhythmic variation in the amount of interstitial gland tissue in the human ovary during the pregnancy cycle and that this tissue exists in sufficient amounts to be of functional significance as an endocrine gland. We have also demonstrated that this tissue is organized histologically like an endocrine gland, that the cells of homologous structures in other species resemble steroid secreting endocrine gland cells and that in man as in other mammals they undergo a rhythm in cytological features which is correlated with the pregnancy cycle.

However unless we succeed in making it clear that this tissue is not the same as thecal gland or luteal gland tissue little will have been accomplished by this investigation. Confusion as to the identity of these three tissues has existed so long, especially among pathologists and endocrinologists and has been so widely disseminated, that it will be difficult to break down the general acceptance of these traditionally established misconceptions. Nevertheless, it seems advisable to again restate a simple and correct classification of

ovarian glandular tissues as applied to mammals.

The theca interna is usually present around secondary follicles and growing vesicular follicles. It is composed of "embryonic" rapidly multiplying, fibroblast like cells derived from the surrounding stroma, and it contains a rich capillary plexus. During the final preovulatory growth period of the follicle these cells enlarge greatly and differentiate into steroid secretors. Their ratio of nucleus to cytoplasm is low in contrast to their earlier condition and their cytoplasm is noticeably granular in ordinary histological preparations. The capillaries are now conspicuous and often congested. The theca interna is at this time a functional thecal gland, an important secretor of estrogens during the proestrous and estrous periods (Corner '38 and Harrison '62). When the follicle ovulates these thecal gland cells may persist temporarily around the developing corpus, but they undergo rapid degeneration and completely disappear within a few days in all species where this has been studied carefully. If a ripening follicle with an already differentiated thecal gland undergoes atresia instead of ovulation then the differentiated thecal gland cells degenerate completely.

If a follicle undergoes atresia after its theca interna has developed, but before the final ripening and formation of functional thecal gland (and probably more than 99% of mammalian follicles do this) then the still embryonic theca interna differentiates into an *interstitial gland*. The nature of these gland masses varies widely in different mammalian groups but in general the cells become rounded or polyhedral but not as large as the thecal gland cells of ripe follicles nor do they have as much cytoplasm in relation to the nucleus. They tend to be arranged in rows or groups of cells radiating outward from the margin of the disappearing cavity of the follicle. Between these rows lie capillaries which, however are seldom conspicuously dilated. The cytoplasm of these gland cells usually appears relatively clear in ordinary preparations, because it contains large rounded vacuoles rather than granules. If stained with osmium or other stains reacting with steroids these vacuoles are seen to be filled

with steroid material (Stafford, Collins and Mossman '42; Stafford and Mossman '45; Mossman and Judas '49; Dawson and McCabe '51; Harrison '62).

As pointed out previously since atresia of follicles in most mammals so far studied occurs from infancy to old age the type of interstitial gland derived from the theca interna of degenerating follicles is the first major adult type of ovarian gland to appear. It occurs periodically often constantly throughout life even beyond the active reproductive period because some follicles grow and undergo atresia beyond the period when any are able to mature and achieve ovulation. We have found this to be true of the human female but we have not included menopausal ovaries in this investigation.

Lest there be any misunderstanding of the nature of the interstitial gland tissue with which this investigation is concerned, it should be pointed out that we are not dealing with the form found in the female embryo and early fetus nor are we including a number of known adult types not derived from the theca interna of degenerating follicles. Since these other adult types are either inconspicuous or absent from the human ovary it seems appropriate to disregard them here.

The luteal gland (pregnancy gland or corpus luteum) is the best known of the ovarian glands both as to morphology and function. Luteal cells usually begin to differentiate from the follicular epithelium of a ripe follicle just before ovulation and develop very rapidly for the first few days after ovulation. They undergo most of their hyperplasia before ovulation but in many species mitoses still occur among the young luteal cells for several days after ovulation especially if the individual is pregnant. In many species apparently most commonly among larger forms, an early accretion of luteal cells occurs around the periphery of the corpus by differentiation of surrounding pluripotential stroma cells. In any case there is a rich invasion into the luteal mass by capillaries from the former thecal gland plexus. The luteal cells usually become much larger than those of either the thecal or interstitial glands and are often not very osmophilic during their early functional stages al-

though steroid substances can be demonstrated in them by more specific tests.

Several types of luteal gland cells have been described by various workers and various origins have been ascribed to them (Corner '19; Harrison, '62). However, it is not clear in most cases whether these are actually different stages in differentiation of a single cell type or whether they do actually represent distinct cell species. The senior author has observed two clearly distinct glandular cell types only in corpora lutea of Artiodactyla (cloven hoofed mammals) and Cetacea (whales). In all other forms including man, his observations suggest simply different degrees of differentiation. This is especially obvious in those species where accretion of stroma cells is prominent. Man is one of these. We believe the paraluteal cells of the human ovary are simply transition stages in the differentiation of stroma cells into luteal cells. This is not to say that they might not have a function different in degree or quality from that of mature luteal cells.

Finally one must admit that paraluteal cells do pose a problem of interpretation especially in man. We believe they differentiate from stromal cells after the thecal gland has degenerated not directly from thecal gland cells as so many authors have implied. We base this chiefly on comparative studies by the senior author (Stafford, Collins and Mossman, '42; Stafford and Mossman '45; Mossman and Judas '49), and on the following reports.

Corner ('45) says of the rhesus ovary: "The theca interna cells retain their identity after ovulation. They are not distinguishable during the period of days 4 to 6 but afterwards can sometimes be distinguished. In the corpus luteum of pregnancy and the corpus aberrans, the theca interna cells or paraluteal cells are readily distinguishable in the bases of the folds and at the periphery of the corpus." Corner Jr ('56) on the human ovary states that "the theca interna and granulosa became indistinguishable on day 2 but that on day 6 theca interna and granulosa are again distinguishable. In the light of the overwhelming comparative evidence and these statements and illustrations of the Corners there seems to be little

that in the rhesus monkey and man thecal gland cells are distinct entities degenerate immediately after ovulation, and that paraluteal cells then differ from the adjacent stroma. Whether these latter are merely developmental steps in the differentiation of luteal cells of identical nature to those of granulosa origin, or are themselves a second distinct species of luteal gland cell is not clear. Allman and Stein (41) found the interstitial gland cell to be indistinguishable from the paraluteal cell. We agree that this is true in many cases, but to go into this matter adequately would take us too far afield. At present we think the evidence favors the interpretation that paraluteal cells are developmental stages in the differentiation of true luteal cells, that at one stage in this process they resemble interstitial gland cells, may indeed be identical with them and in some cases may all to differentiate any further.

If there are three distinct glands characteristically present in all mammalian ovaries, as seems to have been amply demonstrated in the literature then the time has come to designate each by its specific name and to stop the loose use of the terms "thecal tissue" and "luteinization." The names which we believe best suited in view of past usage and nature of each are *thecal gland*, *interstitial gland* and *luteal gland*.

Admittedly "Interstitial gland" is not an ideal term and may need considerable qualification to distinguish between interstitial tissue of thecal origin in contrast to that derived from ovarian or mesovarial stroma, medullary cord epithelium, or rete epithelium, as happens in various mammal groups. It has good historical precedent, however as Limon ('01) and Bouin ('02) used it correctly over 60 years ago.

Perhaps the most irresponsible misuse of terms and the one most often repeated, is that of "luteinization" to refer to any enlargement or hypertrophy of cells associated with the ovary regardless of whether or not there is the slightest evidence of the relation of the hypertrophied cells to the luteal gland. In fact the term has been used frequently where there is direct evidence that the tissue designated has no relation whatever to luteal tissue.

We would emphasize, as a postscript to this, that undifferentiated ovarian tissue both epithelial and stromal, is rather highly pluripotent, even in the adult. It differentiates into a variety of definitive tissues as a complicated response to both genetic factors and to environmental inducing and organizing influences mechanical and chemical. In such a complicated system a great variety of aberrations from the normal or usual are apt to occur. This is evident in the complexity of pathological tumors which often do not clearly simulate any normal tissue although they may produce a preponderance of a certain endocrine action. It is also evident in the intermediate types of cells one often sees in such structures as accessory corpora lutea. This form of atretic follicle usually contains normal interstitial gland cells, some more centrally located true luteal gland cells and many intermediate cell types that cannot be categorized as either (fig. 9).

With this orientation as a background, the specific problem of the changes in ovarian interstitial gland tissue in relation to the reproductive cycle in man and other mammals can be discussed. Although to our knowledge no real attempt to measure the volume of interstitial gland tissue has been made previously it has been recognized for years that interstitial gland tissue does increase during gestation in many mammals (bat — Athias '20; water shrew — Price '53 certain monkeys and man — Cohn, '03 Seitz, '06 Wallart, '08 Watrin, '24; Dubreuil, 48 Nelson and Green, '58 Forleo '61).

If the ovarian interstitial gland of man is a hormone producer then it is reasonable to believe that it must function either in storage or secretion whenever it is present in a differentiated condition, which we have seen is from infancy to the menopause. Since the tissue appears to fluctuate greatly in amount and in degree of cytological differentiation, one must assume that its function is also periodic or rhythmic, reaching its maximum in late gestation when the tissue is most voluminous. Again we must caution that there is as yet no completely convincing physiological evidence as to what this function is or in fact that female interstitial gland tissue has a specific function.

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PLATE I

EXPLANATION OF FIGURES

- Ovary of two and one-half year old child showing large atretic follicle surrounded by interstitial gland tissue. 143 L. \times 126.
- Wall of the atretic follicle shown in figure 1. Note the short rows of typical interstitial gland cells. 143, L. \times 345.
- Wall of an atretic follicle of a seven year old child showing short rows of relatively undifferentiated interstitial gland cells. 131. \times 330.
- Wall of an atretic follicle of a woman of 18 years showing the relatively undifferentiated interstitial gland cells typical of nonpregnancy 112, L. \times 210.

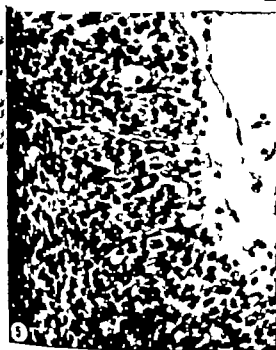
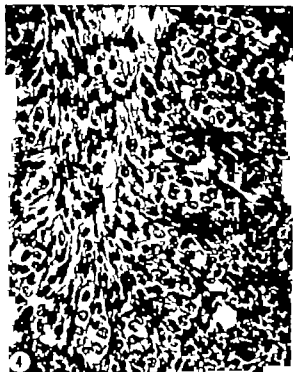


PLATE 2

EXPLANATION OF FIGURES

All figures are from the left ovary of no. 51 a woman at three and one-half months of gestation

- 7 Wall of atretic follicle showing interstitial gland cells at various degrees of differentiation together with numerous endothelial and fibroblast nuclei. $\times 260$
- 8 More mature interstitial gland tissue of a follicle in late atresia. $\times 220$.
- 9 Luteal gland tissue (actually a small accessory corpus luteum) occurring in the central portion of an interstitial gland mass formed from an atretic follicle. Note that most of these luteal cells are intermediate in morphology between interstitial gland cells and fully differentiated luteal cells shown in figure 10. $\times 220$
- 10 Outer edge of the primary corpus luteum showing luteal cells at top paraluteal cells centrally and stromal connective tissue at the bottom. Note the close similarity of many paraluteal cells to interstitial gland cells. Note also that toward the top they resemble luteal cells and that toward the bottom they are small and lie among the stromal fibers. Examination of sections of this and similar paraluteal masses indicates that they in fact differentiate from stromal cells and that they must often continue their differentiation until they become true luteal cells. $\times 330$.

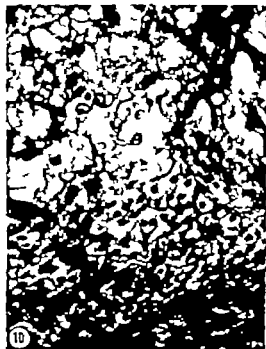
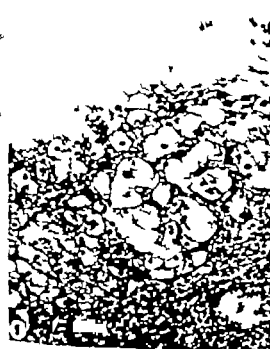
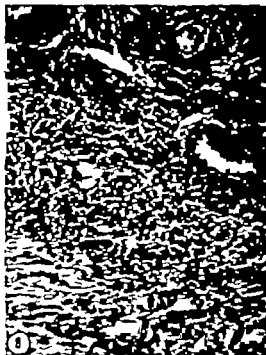
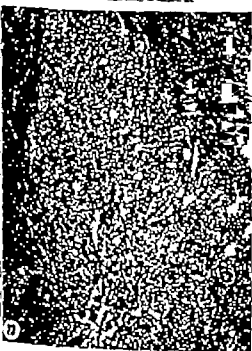


PLATE 3

EXPLANATION OF FIGURES

- 11 A medium sized (3 mm) vesicular follicle showing the relative thickness of the granulosa (g) and the thin vascular theca interna (n) the cells f which are in early stages of differentiation into thecal gland cells. Note the gradual transition from the thecal cells to those of the stroma of the theca externa an indication of their derivation from the stroma 119 L. $\times 220$
- 12 Interstitial gland cells differentiating in the theca interna of an atretic follicle at five and one-half months of gestation. The arrangement in radial cord is clear as is the small size of the cells and their high ratio of nucleus to cytoplasm. 119 L. $\times 420$.
- 13 Characteristically well developed interstitial gland mass at eight and one-half months of gestation. Obviously such masses must include cells differentiated from stroma far beyond the limits of the theca interna at the time follicular atresia began since most of interstitial gland cells is rarely if ever seen. 104 B. $\times 85$.
- 14 Detail of mature interstitial gland tissue at eight and one-half months of gestation. Note the nuclei of capillary endothelium crowded between the rows of gland cells. These latter show the characteristic granular cytoplasm and nuclei of average chromaticity of the interstitial cells of late pregnancy and should be compared with figure 15 which is of mature interstitial cells at three and one-half months of gestation. 104 B. $\times 420$.
- 15 Detail of typical mature interstitial gland tissue of early gestation (3½ mos.) showing the characteristic vesicular cytoplasm and highly chromatic nuclei. Note that the cells are also smaller than those of late pregnancy shown in figure 14. The more irregular arrangement of the cords of cells is not a constant difference (Cf. figs. 7 and 8 of the same ovary in which the cells are more regularly aligned) 51 L. $\times 420$.



The Structure of the Functional Pronephros in Larvae of *Ambystoma opacum* as Studied by Light and Electron Microscopy¹

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ABSTRACT The functional pronephros in early larvae of *Ambystoma opacum*, studied in serial sections, consists of an anterior and posterior nephrostoma, respective proximal tubules which fuse into a common proximal tubule, a ciliated intermediate segment, and distal tubule, which leaves the pronephros posteriorly as the nephric duct. In the coelom medial to each pronephros is glomus, arising from the dorsal aorta.

In electron micrographs of osmium-fixed, methacrylate-embedded pronephros and glomus, the fine structure generally resembles that seen in adult kidneys. Proximal tubule cells show brush border of irregular microvilli, tubular invaginations, reabsorption granules, and very few basal infoldings. Cells of the distal tubule have numerous radially-oriented mitochondria, and the basal infoldings are generally well developed. The fine structure of the nephric duct seems to resemble that of the distal tubule. Cells of the nephrostomes and intermediate segment bear cilia of usual fine structure, and contain melanin granules, lipid droplets and slender mitochondria. The glomus resembles glomerulus in having an endothelium with sparse pores, basement membrane, and epithelial cells with numerous interdigitating foot processes.

The similarity at the fine structure level between the pronephros and the more posterior mesonephros and metanephros of adult vertebrates suggests the serial homology of vertebrate nephrons, and thus constitutes further evidence for the archinephros or homonephros theory of the origin of vertebrate kidneys.

The nature and significance of the pronephros has been debated for nearly a century. Many of the earlier workers held that it constituted the remnant of a primitive kidney distinct from the adult kidneys of modern vertebrates. This view has suffered considerably in the light of subsequent embryological and comparative studies. The more modern view well summarized by Fraser ('50) denies the primitive nature of the pronephros, and emphasizes the essential unity of the nephrogenic material, maintaining that the pronephric tubules are basically the same both structurally and functionally as those which develop more posteriorly and give rise to the mesonephros and metanephros.

With the advent of the electron microscope it is now possible to gain further evidence on this question by examining the pronephros and its associated glomus to see if they possess the elaborate specializations of fine structure seen in adult kidneys (Pease '55; Rhodin, '58 '63). The present investigation describes the fine structure of the pronephros and glomus in early larvae of the marbled salamander

Ambystoma opacum. In such larvae the pronephros is particularly well developed and is known to be serving as a functional kidney (Howland '21).

MATERIALS AND METHODS

Eggs of *Ambystoma opacum* (Gravenhorst) were obtained from a professional collector Mr. J. C. Nicholls, who collected them in Cherokee County North Carolina. After hatching in mid-October (see Noble and Brady '53) the larvae were kept in a constant temperature room (about 18°C) and were fed *Enchytraeus* worms. Some of the larvae were killed a day or so after hatching when they were 19 mm long.

This material has been published in abstract ('61, Anat. Rec., 139: 215), and has been cited as personal communication (Fest, '63, p. 5). Part of the writing of this paper was done during the tenure of Public Health Service grant number AM-05423 from the National Institute of Arthritis and Metabolic Diseases.

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¹Many authors prefer the term "opisthonephros" (Kerr, '19, p. 221) in referring to the kidney of adult amniotes, since this organ arises from that portion of the nephrogenic plate which furnishes both the mesonephros and metanephros of anamniotes. However, the term "pronephros" seems to be more widely used, especially among embryologists, and is utilized in this paper. This usage is defended by Fraser ('50, pp. 166-170).

and had just begun to feed. Others were killed a week later when they were 20–21 mm long.

For observations with the light microscope whole larvae were fixed overnight in 10% acrolein in distilled water at refrigerator temperature. The tissues were dehydrated in increasing concentrations of a 1:1 mixture of methyl alcohol-methyl cellosolve in distilled water followed by a 1:1 mixture of methyl cellosolve-chloroform and were infiltrated and embedded in polyester wax. This method (Sidman Mottla and Feder '61, Feder personal communication) provides excellent preservation of cytological detail. Ten micron serial sections were cut through both pronephroi in each of three larvae and were stained with the Mallory triple staining technique. Two pronephroi were reconstructed, one from a 19 mm and the other from a 20 mm larva. The latter served as a basis for figure 2. To reconstruct a pronephros serial sections were projected and traced on paper and the course of the various tubules was mapped out on the tracings by means of a system of colors and numbers. These data were then used as a guide in constructing a clay model. Because of the complexity of the organ the usual wax reconstruction technique was not employed, since the inner convolutions of the tubules would have been difficult to follow in such a model.

For electron microscopy the cervical region of the larva was excised and fixed one and a half hours in cold 1.3% osmium tetroxide buffered with *s*-collidine (Bennett and Luft, '59) and containing 5% sucrose. The tissues were dehydrated over a period of about an hour in increasing concentrations of 1:1 methyl alcohol-methyl cellosolve in distilled water and were then left about three hours in three changes of alcohol-cellosolve. They were then infiltrated and embedded in prepolymerized 1:4 methyl and *n*-butyl methacrylates catalyzed with 1.5% Lupercol CDB. Final polymerization was effected by ultraviolet light. Sections cut on a Porter Blum MT 1 microtome were picked up on collodion-covered, carbon-coated grids stained with lead hydroxide (Watson, '58) and sandwiched with a thin carbon coat. The sec-

tions were viewed in an RCA EMU electron microscope.

OBSERVATIONS

The pronephros and glomerus of *Ambystoma opacum* larvae are similar in overall structure to those described in larvae of other urodeles (Field, 1891; Ruhl, 1911; Howland, '21; McCurdy '31). The pronephros shows a similar pattern of organization (fig. 1) to a single primary mesonephric nephron of the adult urodele kidney and is believed to function in a similar way. In the case of the pronephros blood filtrate passes into the coelom through the walls of the glomerus, and is subsequently drawn into the two nephrostomes by the action of cilia which line the nephrostomal epithelium. The filtrate then passes along the two proximal tubules into the common proximal tubule and hence through the ciliated intermediate segment into the distal tubule. Absorptive and secretory processes may take place in the proximal and distal tubules. The distal tubule becomes the nephric duct posteriorly. For a discussion of pronephric function and other aspects of the pronephros in amphibian larvae, see Fox ('63).

The actual location and configuration of the pronephros of a 20 mm larva of *A. opacum* is shown in figure 2. The pronephros (*pr*) lies in the dorsolateral body wall of the neck region (fig. 2A and fig. 2) and is bounded dorsally by the cranial musculature laterally by the scapula and medially by the peritoneum and the coelom. Lying within the coelom medial to the pronephros on each side is a glomerus (*g*) a vascular tuft which arises from the dorsal aorta (*a*). In a more detailed view (fig. 2B) the pronephros, as reconstructed from serial sections, is seen to consist of a mass of convoluted tubules. The organ is approximately $\frac{3}{4}$ mm long, $\frac{1}{4}$ mm high and $\frac{1}{2}$ mm wide. Anteriorly and posteriorly the two nephrostomes (*n*) open from the coelom as two short coelomic ducts, each about 30 μ in outside diameter. These connect with the proximal tubule (*p*) and the proximal tubule leads into the distal tubule (*d*) via a ciliated intermediate segment (*is*).

In figure 2C the tubules are spread apart to allow the configuration of the

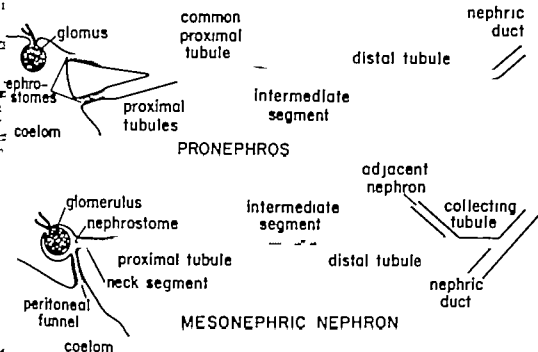


Fig. 1. In these two diagrams the basic organization of the whole pronephros and associated glomus on one side of salamander larva is compared with that of single primary mesonephric nephron in adult salamander (the latter diagram adapted from Chase, '33). The correspondence between the various structures in the two cases is suggested by observations with the light microscope and is further borne out by electron microscopy.

proximal and distal tubules to be visualized more clearly. The proximal tubule (p) is somewhat irregular or saccular in contour and the outside diameter is generally about 80 μ . The distal tubule (d) is more even in outline and is smaller in diameter usually between 50 and 60 μ . After it arises from the intermediate segment (is) the distal tubule passes to the posterior pole of the pronephros then back to the region of the intermediate segment, and finally posteriorly again eventually to become the nephric duct (nd). The space between the various tubules is occupied for the most part by sinusoids (fig. 4) which arise from the posterior cardinal vein and form an extensive vascular network throughout the pronephros.

The general pattern of organization of the pronephros in the 19 mm larva was the same as that of the 20 mm larva described above but there were some differences in the details of coiling of tubules, which may merely reflect individual varia-

tion. In particular the course of the distal tubule was somewhat more complicated.

The nephrostome. The ciliated epithelium of the nephrostome (fig. 4) varies in height from about 10 μ near the junction with the proximal tubule (np) to about 14 μ near the mouth of the nephrostome (n) where it is continuous with the squamous epithelium lining the coelom. Near the mouth of the nephrostome the epithelial cells are closely packed together and their oval nuclei, which nearly fill the cells, are often oriented perpendicular to the epithelial surface. A tuft of cilia arises from the central region of the luminal surface of each cell. The cytoplasm contains numerous melanin granules and a considerable number of filamentous mitochondria, which are randomly oriented in the cytoplasm and tend to be obscured by the melanin granules.

Under the electron microscope the various organelles of the epithelial cells can be seen in greater detail (fig. 5). The

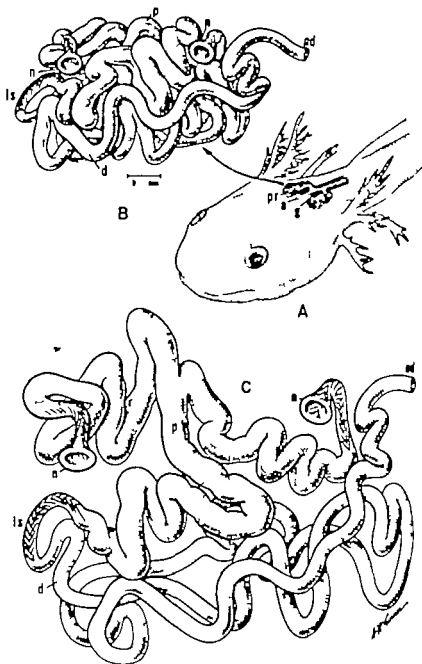


Fig. 2 The pronephros of 20 mm larva of *Ambystoma opacum*, as reconstructed from serial sections. A The pronephros (pr) on each side lies in the dorsolateral body wall of the neck region. Extending from the dorsal aorta (a) into the coelom medial to each pronephros is a glomerulus (g). B A closer view of the right pronephros shows the two nephrostomes (n) and convolutions of the proximal (p) and distal (d) tubules, as well as the intermediate segment (is) and nephric duct (nd). C In this drawing the various portions of the pronephric tubule are spread out so their course can be followed more clearly. The anterior and posterior nephrostomes (n) open into the corresponding proximal tubules, which unite as the common proximal tubule (p). The latter connects, by way of the intermediate segment (is) with the distal tubule (d) which is continuous posteriorly with the nephric duct (nd).

mitochondria (*m*) are of small diameter, averaging about 0.25μ , and contain cristae in moderate abundance. The Golgi complex (*gc*) and agranular endoplasmic reticulum (*er*) are fairly well developed. The nucleus is not unusual, except that it occasionally contains granular inclusions (*bac*) of unknown nature. Lipid droplets (*lp*) occur but are less prominent than the melanin granules (*mg*). The cilia in the central tuft, like those in other amphitritans (Fawcett and Porter '54, Bargmann, Knoop and Schiebeler '55) have a basal plate (*bp*). Striated rootlets (*sr*) with a 750 \AA periodicity extend down from the basal bodies (*bb*). In some micrographs, a feltwork of very fine fibrils is visible underlying the luminal surface of the cell at the level of the basal bodies (Fawcett and Porter '54).

The proximal tubule. In cross sections of proximal tubules seen with the light microscope (fig. 4 p) the epithelial cells bulge somewhat into the lumen, their height ranging from about 5μ at the junction of cells up to 15μ at the level of the nucleus. The epithelium is generally lower in the common proximal tubule. When the cells are seen in surface view (*ps*) the nuclei are oval or round, but where tubules are cut in the usual cross section the nuclei appear more flattened. The individual cells show the same general features as are seen in the proximal tubules of adult kidneys, namely a brush border, numerous resorption granules, and a moderate number of mitochondria located mostly in the basal portion of the cells. The brush border is variable in height, averaging about 3μ . Granules occur most commonly in the apical cytoplasm, and often vary considerably in abundance from one cell to another. The cells also contain occasional melanin granules, sometimes in small clusters. Mitochondria are more abundant in the cells of the anterior and posterior proximal tubules than in the common proximal tubule. In their mitochondrial content and general shape the cells of the common proximal tubule therefore resemble those of the straight portion of the proximal tubule in the mammalian metanephros (Rhodin, '58, '63).

As seen in the electron microscope (figs 6-8) the brush border (*br*) consists in general of irregular and interconnected evaginations of the cell surface. Uniform, cylindrical microvilli like those composing the brush border in adult kidneys are rarely seen. Components of the endoplasmic reticulum are common within the irregular microvilli (figs. 7 and 8 *er*) which may be an indication that the irregularities are normal, and not merely artifacts of preservation.

Tubular invaginations, about 600 \AA in diameter originate from the plasma membrane at the base of the brush border and pursue an irregular course into the apical cytoplasm (*ti*, figs. 6 and 7). These tubular invaginations appear more electron dense than nearby elements of the agranular endoplasmic reticulum (*er*). This greater density may not be due entirely to contained material, for in cases where the invaginations are cut in cross section the limiting membrane shows considerable density and when the limiting membrane is seen in surface view (fig. 9) there appears to be an irregular pattern of oblong profiles along the membrane. The significance of this fine structure is unknown.

The characteristic granules observed with the light microscope appear in electron micrographs as vacuoles which are filled to one degree or another with a flocculent precipitate (figs. 6 and 7 *gr v*). The granules vary in size but are commonly about 1μ in diameter. Miller has presented evidence in the proximal tubule of the mouse kidney that vacuoles give rise to granules by the accumulation of protein absorbed from the lumen of the proximal tubule by way of the tubular invaginations ('60) and that the granules may be considered to be lysosomes, since they contain acid phosphatase ('63). Gérard and Cordier ('34) showed in the pronephros of larval anurans that the proximal tubule cells are capable of actively taking up a wide variety of materials from the lumen of the tubule.

Occasional proximal tubule cells contain small, dense, membrane-bound inclusions (fig. 10) about 0.2μ in diameter which are found throughout the cytoplasm but are more numerous in the basal half of

the cell. The chemical nature of these structures is unknown but they bear a close morphological resemblance to inclusions interpreted as emulsified fat droplets by Palay and Karlin ('59) in their study of fat absorption in mouse intestinal epithelial cells.

The intermediate segment. As seen with the light microscope the ciliated intermediate segment (fig. 4 is) is essentially similar in structure to the deeper portions of the nephrostomes. In electron microscope sections it was impossible to distinguish between these two segments since identification would have required extensive serial sections a procedure which in electron microscopy is so difficult that the probable rewards did not seem to justify the work involved.

The distal tubule. The epithelial cells of the distal tubule are generally flatter than those of the proximal tubule the cell height varying from about 6μ to as little as 2μ , and at the level of the nucleus up to 9μ . The cells lack the characteristic granules seen in the proximal tubule but like the proximal tubule cells may contain occasional single or clustered melanin granules. Under the light microscope the distal tubule cells show no brush border or at most a faint suggestion of one; the electron microscope reveals sparse stubby microvilli on the luminal surface of some the cells.

In both light and electron micrographs, the most prominent feature of distal tubule cells is the general abundance of mitochondria usually oriented radially with regard to the tubule (fig. 12). Cases were observed where the mitochondria were more numerous than those shown in figure 12 while in other cases cells showed fewer mitochondria (fig. 11). Also prominent in electron micrographs of these cells are numerous infoldings of the plasma membrane at the base of the cell (fig. 12). These basal infoldings partially compartmentalize the cytoplasm and enclose the radially-oriented mitochondria. In the deeper portions of the infoldings, the two opposing membranes sometimes seem to give way to what might appear in section to be a series of vesicles arranged in linear order (see fig. 12). However it is more likely that these are merely places where

the basal infoldings contain irregular invaginations, and therefore in section appear discontinuous (Tormey '63).

The nephric duct. There is little change in the structure of the distal tubule as seen by either light or electron microscopy as it leaves the confines of the pronephros and continues posteriorly as the nephric duct. Observations were made with the electron microscope only on the most proximal portion of the nephric duct. However in light microscope serial sections the epithelial cells generally resemble distal tubule cells throughout the length of the duct, for example in their abundant radially-oriented mitochondria. There were some minor differences the epithelium was slightly higher (usually about 9μ , and about 11μ at the level of the nuclei), its nuclei were somewhat more closely-spaced, and the melanin granules seemed more numerous. In 19 mm larvae the anterior mesonephric tubules are already connected to the nephric duct and are showing signs of cellular differentiation.

The glomus. The glomus consists of a mass of interconnected capillary loops arising from the dorsal aorta and entering into the coelom on each side adjacent to the posterior half of each pronephros. The capillary endothelium is covered throughout by an epithelial layer which is a reflection of the parietal peritoneum and is homologous with the visceral layer of Bowman's capsule in renal corpora of the adult kidney.

In a low power electron micrograph (fig. 13) the glomus is seen to have basically the same organization as that found in the glomeruli of the adult amphibian mesonephros (Pak Poy '57). At higher magnification (fig. 14) the structure of the endothelium (end) the epithelium (made up mostly of foot processes, *fp*) and the basement membrane (*bm*) can be seen to better advantage. The endothelium is irregular in thickness, and in its thinner areas is penetrated by scattered pores which seem to be less numerous than those described in amphibian mesonephric glomeruli (Pak Poy '57). The epithelial cells send out cytoplasmic processes (*cp*) which ramify over the surface of the basement membrane into foot processes (*fp*), and these interdigitate with the foot pro-

processes of adjacent epithelial cells. The foot processes are generally coarse and but frequently become fine and closely apposed. The cell bodies of the epithelial cells sometimes lie directly on the basement membrane but for the most part the epithelial layer on the capillary is made up of the foot processes.

Basement membrane seems to be quite swollen in the present material probably a preservation artifact. In areas where it appears to be most nearly intact, the basement membrane is commonly about 3,500 Å thick, although there is considerable variation. A thin outer layer of the basement membrane, about 600 Å thick and lying next to the foot processes, seems to be less subject to preservation damage. Processes of cells are frequently observed in the basement membrane between the endothelium and epithelium (fig. 14 pc). In some cases these may derive from endothelial cells, although similar processes were reported by Pak Poy ('57) in glomeruli of adult frogs and toads, and were interpreted by this author as deriving from so-called "pericapillary cells."

DISCUSSION

The fundamental studies of Howland ('21) and of other workers (see Fox, '63) have shown that the pronephros of larval urodeles plays an important role in water balance and excretion until it is superseded later in larval development by the mesonephros. The findings reported in the present investigation demonstrate that this functional pronephros and its associated glomerus exhibit the same general pattern of cellular fine structure as has been described in the mesonephros and metanephros of adult vertebrates.

The fine structure of the proximal and distal tubules has been described in mammals (Rhodin, '58, '63 and others), reptiles (Anderson '60), amphibians (Bargmann, Knoop and Schiebler '55; Fawcett, '58; Karnovsky '63; Christensen '63) and bony fish (Gritzka, '63). In the pronephros described here the brush border of the proximal tubule is similar to that of other vertebrate kidneys in being composed of numerous microvilli, although the pronephric microvilli are generally more irregular in form than the cylindrical micro-

villi seen in most other kidneys, including those of adult frogs (Fawcett, '58; Karnovsky '63). However similar irregular microvilli have been described as characteristic of the proximal tubule in the fish *Fundulus heteroclitus* (Gritzka, '63). Although these irregular microvilli could be preservation artifacts (Mausbach, Madden and Latta, '62) the presence of numerous and prominent elements of the endoplasmic reticulum in the microvilli (figs. 7 and 8) may suggest that the form is normal. The tubular invaginations and apical granules of the proximal tubule in the pronephros correspond in morphology to those described in other kidneys although attention has not previously been called to the patterns visible in surface views of the walls of the tubular invaginations.

The proximal tubule cells of the pronephros lack appreciable basal infoldings and the mitochondria do not exhibit the striking orientation seen in the distal tubule. The same is generally true in the adult amphibian mesonephros (Karnovsky '63; Christensen '63; Peyrot and Mastrello, '61). On the other hand, in proximal tubule cells of the mammalian metanephros, there is some tendency toward basal infoldings and mitochondrial orientation, although less so than in the distal tubule.

The distal tubule cells of the pronephros resemble those of adult kidneys in having sparse microvilli on the luminal surface. In some cases, numerous mitochondria generally oriented radially with regard to the tubule and basal infoldings of the plasma membrane which enclose the mitochondria in basal compartments. The mitochondria and basal infoldings are variable in abundance but where well developed are comparable to those described in adult kidneys.

The fine structure of the glomerulus has been described in mammals (Pease '55; Rhodin '63 and others), birds (Pak Poy and Robertson '57; Prestage and Beams, '57), reptiles (Pak Poy '59; Anderson, '60), amphibians (Pak Poy '57; Bargmann, Knoop and Schiebler '55) and in bony fish (Pak Poy '58). The glomerus described in the present study is basically similar in fine structure to the glomerulus

of the adult amphibian mesonephros, which has essentially the same pattern of organization as that of the mammalian metanephros except that some of the cellular specializations are less highly evolved.

The present findings provide new evidence for the current theory of vertebrate kidney evolution. Near the turn of the century two conflicting views were in vogue to explain the phylogenetic origin of vertebrate kidneys. One view originally put forth especially by German workers maintained that during the course of evolution the vertebrates had successively developed three separate and distinct adult kidneys, the pronephros, the mesonephros and the metanephros and that this evolutionary history was recapitulated during the embryonic development of higher vertebrates. The other view originally held mostly by British and American workers, claimed that the pronephros, mesonephros and metanephros were merely regional specializations of a single primitive kidney, the archinephros (Lankester 1877 p. 429) or "holonephros" (Price 1897) which was thought to have extended the full length of the body cavity in some hypothetical ancestral vertebrate. According to this latter interpretation, as it eventually came to be understood the pronephros emerged in vertebrate evolution as a small kidney, an anterior differentiation of the archinephros designed to arise early in embryological development and thereby satisfy larval excretory needs until the more posterior mesonephros could be fully developed.

The basic question at issue between these two rival theories was the degree of serial homology in the vertebrate excretory system and it is therefore not surprising that a central issue was to what extent the pronephros, mesonephros and metanephros resembled each other. As comparative and embryological evidence was accumulated increasing similarities between the three kidneys emerged and the archinephros theory became more and more widely accepted. However the peculiarities of the pronephros still remained a problem for those who held this theory. Thus Goodrich wrote in '30 (pp 680 and 683):

When the development of the mesonephros and metanephros was accurately worked out had to be admitted that they are essentially of the same nature and that the peculiarities of the metanephros are related to its late embryological appearance and more specialized structure. On comparison of the mesonephros with the pronephros it is, however, not so easily made, as there is still much doubt as to the exact names they bear to each other.

After making this statement, Goodrich proceeded to review some of the evidence that the pronephros and mesonephros were indeed serially homologous, as claimed in the archinephros theory. Since that time, additional findings, many of them arising from experimental embryology have served to further substantiate the archinephros theory and it now seems to have gained near universal acceptance. The evidence for this theory has been admirably marshaled by Fraser ('50).

The results of the present investigation further corroborate the archinephros theory by showing that the various cell types of a functional pronephros and glomerulus exhibit the same striking specializations of fine structure that have been described for corresponding cell types in the mesonephros and metanephros of a wide variety of vertebrates.

An additional implication of the present findings concerns the terminology used to designate the various segments of the pronephric nephron. In the past there has been considerable variation in usage, often because of differing embryological findings and interpretations. Thus the anterior and posterior proximal tubules have been variously called "secretory," "urinary" or "excretory" tubules while that portion which is here called the common proximal tubule has often been referred to as the "collecting tubule" or the common duct. The tubule extending from the intermediate segment back to the cloaca is generally considered as one unit, the archinephros.

Many modern textbooks of comparative anatomy, while subscribing in general to the archinephros theory still convey the impression that the pronephric renal corpuscle evolved from a basic pronephric type, through an enlargement of the glomerulus and the development of the proximal and distal tubules. However, the best embryological evidence has long suggested the reverse—the primary mesonephros nephron is the basic vertebrate nephron, and that the pronephric type derives from it by secondary changes involving reduction of the peritubercular region and the fusion of several segmental glomeruli to form a single glomerulus (see Fraser, '50).

segmental" duct or by some authors pronephric primary or nephric duct. Since portions of the pronephric are here shown to correspond in details of their fine structure to the proximal and distal tubules of adult kidneys, it seems reasonable and desirable to employ a nomenclature which reflects this similarity. Such a terminology has been utilized throughout the present study (fig. 1). Although the archinephric duct seems to exhibit a distal tubule structure over most of its length, and may possibly subserve a distal tubule function, only that portion which lies within the confines of the pronephros is called the distal tubule in the present paper, the remainder being termed the nephric duct. The above interpretations based on fine structure criteria, are in essential agreement with the conclusions of Jaffee (see '63) based on vital staining and phenol red transport.

ACKNOWLEDGMENTS

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LITERATURE CITED

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PLATE 1

EXPLANATION OF FIGURES

- 3 Transverse section through the cervical region of 19 mm larva of *Ambystoma maculatum* showing the pronephros (pr) sectioned near its posterior pole and the glomerus (g) on each side. The pronephros lies deep to the scapula (sc) and adjoins the coelom () in which are seen the esophagus () and lungs (l). The connection between the glomerus on the left and the dorsal aorta () is shown in this section. Above the aorta are the notochord (n) and spinal cord (sp). At the extreme left and right in the figure are sections of the gills. $\times 55$.
- 4 Transverse section near the anterior pole of the left pronephros of a 19 mm larva. The ciliated epithelium of the anterior nephrostome () is continuous with the parietal peritoneum (pp). Although the nephrostome passes out of the plane of section, it re-enters the section at the junction (p) with the anterior proximal tubule of which three other sections (p) are visible one in surface view (ps). Except for the ciliated intermediate segment (is) all the other profiles are of the distal tubule (d and unmarked). Sinusoids containing red blood corpuscles (rbc) occupy the space between tubules. $\times 255$.

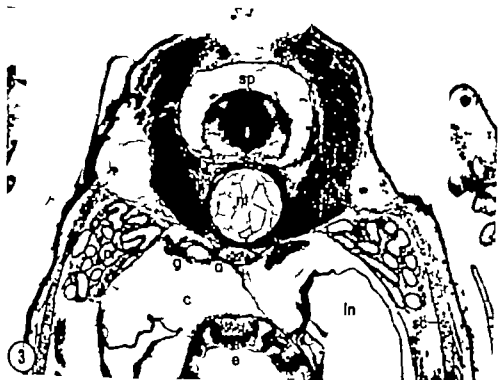


PLATE 2

EXPLANATION OF FIGURE

- 5 Nephroblastomal epithelial cell. The basal bodies (*bb*) of the cilia give rise to striated rootlets (*sr*) with 730 Å periodicity and at the base of each cilium is basal plate (*bp*). The mitochondria (*m*) are of small diameter about 0.25 μ average and the background cytoplasm contains agranular endoplasmic reticulum (*er*) and an element of the Golgi complex (*gc*). In one area of the cytoplasm are numerous melanin granules (*mg*) between which are found distorted lipid droplets (*lp*). The nucleus contains granular inclusion (*bac*) of unknown nature $\times 14,200$



PLATE 3

EXPLANATION OF FIGURE

- 6 Proximal tubule cell. At the base of the sparse and irregular microvilli of the brush border (*br*) are invaginations of the plasma membrane the tubular invaginations (*ti*) which extend down into the apical cytoplasm. Vacuoles (*v*) are thought to become granules (*gr*) by accumulating material absorbed from the lumen by way of the tubular invaginations (Miller '60). Agranular endoplasmic reticulum (*er*) and Golgi complex (*gc*) are also seen in the cytoplasm. There are few mitochondria (*me*) and no hydrolytic basal infoldings occur at the base of the cell (lower left).



PLATE 4

EXPLANATION OF FIGURES

- 7 The apex of a proximal tubule cell showing in greater detail the brush border tubular invaginations (ti) and granule (gr). The microvilli of the brush border are irregular in form, and commonly contain elements of the endoplasmic reticulum (er). $\times 25,000$.
- 8 Horizontal section through the brush border showing cross sections of the very irregular and anastomosing microvilli. Small profiles of endoplasmic reticulum (er) are frequently seen. $\times 23,700$.
- 9 The limiting membrane of tubular invagination seen in surface view. Note the uneven pattern of oblong profiles (arrows) along the membrane. The significance of this fine structure is unknown. $\times 83,000$.
- 10 Small, dense, membrane-bound inclusions about 0.2μ in diameter are seen in occasional proximal tubule cells and are here shown among mitochondria. The chemical nature of these inclusions is unknown, but they closely resemble structures described as emulsified fat droplets (Palay and Karlin '39). $\times 25,000$.

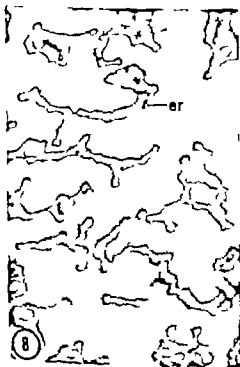


PLATE 5

EXPLANATION OF FIGURES

- 11 Distal tubule cell. The lumen of the tubule is at upper left and sin solid, lined by an endothelium (*end*) and containing red blood cells (*bc*) is at the lower right. The mitochondria and basal infoldings characteristic of distal tubule cell are of moderate number in this cell. $\times 6,000$
- 12 Base of a distal tubule cell showing somewhat oblique sections of oriented mitochondria and of basal infoldings, some of which appear to be fenestrated (*fen*). In this study distal tubule cells with more numerous mitochondria and still more striking basal infoldings than those shown here were not uncommon. $\times 21,000$.



PLATE 6

EXPLANATION OF FIGURES

- 13 Glomus. In this low power electron micrograph several capillaries (cap) of the glomus are shown surrounded by the coelomic space (). The nuclei of a number of endothelial cells (end) and epithelial cells (ep) are present in the field. Cytoplasmic processes (cp) extend out from the epithelial cell to ramify over the capillary basement membrane in attenuated foot processes, which interdigitate with those of adjacent epithelial cells. The foot processes constitute most of the epithelial layer covering the capillaries, except occasionally when the cell body itself happens to lie against the basement membrane (arrow). A leucocyte (alc) partially occludes the lumen of one of the capillaries. Some cells contain clusters of melanin granules (mg) $\times 3,600$.
- 14 Capillary wall of the glomus, at higher magnification. The endothelium (end) is irregular in thickness. The basement membrane is inadequately preserved except for a thin outer layer (bm) which is covered by the foot processes (fp) from the epithelial cells. In the basement membrane region between the endothelium and epithelium are cell processes (pc) which may derive from endothelial cells, or possibly from so-called pericapillary cells (Pak Poy 37) $\times 14,500$.

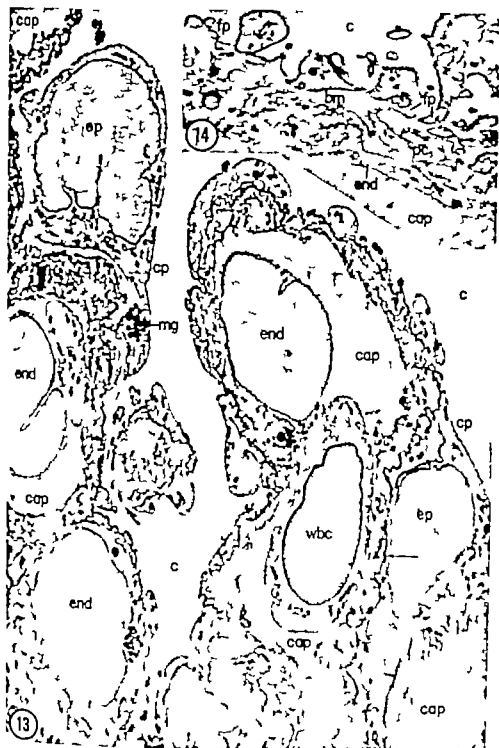


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Structural and Functional Aspects of Rodent Salivary Glands Including Two Desert Species¹

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ABSTRACT The submaxillary glands of the adult desert rat, antelope squirrel, rat, mouse and hamster have in common low levels of amylolytic enzyme in comparison with the relatively high levels of parotid gland amylase in these rodents. Submaxillary gland acini are classed as seromucous secreting although there is some variation in the carbohydrate histochemistry of these secreting units. Granular tubules are absent in antelope squirrel submaxillary glands and they are present in the submaxillary glands of the desert rat, rat, mouse and hamster. Electron micrographs reveal the presence of numerous basal folds in the acini of antelope squirrel submaxillary and parotid glands. These structures were not observed in the salivary gland acini of the hamster. Golgi membranes and immature secretion granules are topographically intimate in parotid glands of the hamster and antelope squirrel. In the submaxillary glands of these two rodents, the secretory material appears to originate in relation to the endoplasmic reticulum and secondarily the granules become associated with a diffusely arranged system of Golgi membranes. The sublingual glands of all the rodents of this study are predominantly ones that produce mucous secretion and contain well developed striated duct systems. Of the salivary glands investigated in this study the parotid glands of the rat, mouse and desert rat produce an isotonic saliva; the saliva of the other glands is definitely hypotonic.

The morphology of the salivary glands of desert rodents does not appear to have been previously described even though these structures may play a role in adaptation to desert conditions (Bartholomew and Hudson, '61; Schmidt-Nielsen and Schmidt-Nielsen '63). It was therefore of interest to investigate the morphology of the salivary glands of desert rodents in comparison with laboratory rodents. The two desert rodents used in this investigation were the desert rat and antelope squirrel, and the laboratory rodents the hamster, rat and mouse. Comparison of functional characteristics of the desert and laboratory animals was also undertaken since a correlation between structure and function has been suggested previously (Shackelford and Klapper '62a, '62b and '62c; Schneyer and Schneyer '38, '60a and '60b).

METHODS AND MATERIALS

Three fixatives were used in the preparation of tissues for light microscopic studies. These were Bouin's buffered 10% formalin and Zenker formal (90 parts Zenker's fluid and 10 parts formaldehyde). Paraffin sections were examined after staining with the Masson, hematoxylin and

eosin and a modification of Masson's technique. Histochemical stains employed were the periodic acid Schiff Alcian blue buffered toluidine blue and the p-hydrazinobenzene-sulfonic acid reaction (Shackelford, '63a). Alcian blue and periodic acid Schiff reactive substances were characterized using the malt diastase, bull testis hyaluronidase (McManus and Mowry '60) and *Vibrio cholera* neuraminidase (Spencer and Warren, '60) digestion techniques.

Submaxillary and parotid glands from the hamster (*Cricetus auratus*) and the antelope squirrel (*Citellus tereticaudus*) were fixed for electron microscope studies. Small fragments of the glands were fixed in buffered osmium tetroxide (pH 7.4 with sodium acetate-sodium veronal buffer) and embedded in methacrylate or epon. Thin sections of epon embedded material were stained by the lead hydroxide method of Millonig ('61). The sections were examined with Phillips 100-B and Phillips 75-B electron microscopes.

Physiological studies were performed on adult desert rats (*Dipodomys deserti* and *Dipodomys merriami*), antelope squirrel, white mice, Long Evans rats and hamsters.

¹This study supported by U. S. Public Health Service grants DE-61328-03 and D 1674.

fasted for 24 hours prior to experimentation. The saliva evoked in response to stimulation by injection of pilocarpine nitrate (2 mg/300 gm animal) was collected directly from the duct orifice by micropipette and diluted immediately with double-distilled water for subsequent electrolyte determination by Coleman flame photometry. Glands were homogenized in phosphate-buffered saline, centrifuged, and the supernatant was used as the enzyme source. Amylase activity is expressed as the number of milligrams of reducing substance (as glucose) per mg of tissue and was determined using a modification (Schneyer and Schneyer '56) of the method of Myers, Free and Rosinski (44).

RESULTS

Light microscopy of desert rat and antelope squirrel submaxillary glands. The submaxillary gland of the male desert rat is structurally similar to that of the male white mouse. The acinar cells exhibit acidophilic staining properties and are finely granular. A basophilic ergastoplasmic zone can be recognized at the base of the cell on either side of the rounded acinar nuclei (fig. 1). The granular cytoplasm of the acini is periodic acid Schiff (PAS) positive but does not stain appreciably with Alcian blue. Sulfation (method of Mowry '58) produces a toluidine blue metachromasia in the acinar cytoplasm and the p-hydroxybenzenesulfonic acid (PBSA) reaction indicates a concentration of vicinal hydroxyl groups consistent with a seromucous classification for the secretion. Most of the submaxillary gland parenchyma of the male desert rat is occupied by large convoluted granular tubules. The granular tubules are composed of tall columnar cells with a basally located rounded nucleus. Basal striations similar to that of striated ducts can be distinguished below the nucleus. The apical two-thirds of the granular tubule cells is filled with acidophilic granules which are PAS positive and Alcian blue negative. These granules stain orthochromatically with toluidine blue after sulfation and stain light green with toluidine blue (0.01% at pH 2.8) after the PBSA reaction. It is probable that PBSA reacts in direct proportion to the concentration of vicinal hy-

droxyl groups (1,2-glycols). Yellow-green to green staining, with 0.01% toluidine blue at pH 2.8 is characteristic of secretory cells in which some PAS positive material is present. A sex dimorphism of the granular tubules is apparent in the submaxillary glands of the desert rat, similar to that reported by others in the mouse (Lacassagne '40; Junqueira et al. '49).

The submaxillary gland of the antelope squirrel in most respects is very different from that of the desert rat. With the light microscope the ergastoplasmic zone is inconspicuous. Nuclei of acinar cells are basally located and rounded or oval shaped. The acinar cytoplasm stains with acid fuchsin, is moderately positive to Alcian blue, and reacts strongly with PAS. The Alcian blue staining is comparable to submaxillary gland acini of the female hamster or to acini of the dog parotid gland. Granular tubules, which are a prominent feature of submaxillary glands of hamster, desert rat, mouse and Long-Evans rat, are absent in the antelope squirrel. A well developed striated duct system is present, however (fig. 2). Submaxillary glands of the antelope squirrel closely resemble the submaxillary gland of the common grey squirrel (unpublished data).

The PBSA-toluidine blue reaction stains submaxillary acini of the antelope squirrel a pale blue color. Hyaluronidase digestion removes most of the Alcian blue positive material in stromal elements of submaxillary glands of desert rat and antelope squirrel. Hyaluronidase also slightly reduces the Alcian blue staining in antelope squirrel submaxillary acini and hyaluronidase plus neuraminidase digestion markedly reduces the Alcian blue reaction in the same area. The possible significance of these results will be discussed subsequently. Malt diastase digestion did not significantly reduce PAS staining in submaxillary glands of the antelope squirrel or the desert rat in comparison with sections known to contain glycogen (of guinea pig submaxillary gland striated ducts or striated ducts of the armadillo parotid gland (Shackelford, '63)).

Ultrastructural comparison of hamster and antelope squirrel submaxillary glands. Electron micrographs of hamster submaxillary glands reveal structures similar

to those described by Scott and Pease ('59) and Leeson and Jacoby ('59) in the rat submaxillary gland. Among prominent features of acini of hamster submaxillary gland are a well developed endoplasmic reticulum (ER) with attached ribonucleoprotein (RNP) particles, a somewhat flat electron dense nucleus, a few scattered mitochondria and intercellular canaliculi (figs. 7-8). The secretory granules, at the base of the acinar cell are mostly enclosed by ER membranes but lose this association in areas adjacent to the acinar lumen or the intercellular canaliculi (fig. 7). Here, there is evidence to support the contention of Palade ('59) that, as the ER relationship to the secretory granules is lost, the smooth Golgi type membranes become closely associated with the secretion. Mitochondria of hamster submaxillary gland acini are sparsely distributed throughout most of the cytoplasm and are elongated or irregularly shaped without any particular orientation. Basal infolded plasma membranes are rarely observed in acinar cells of hamster submaxillary glands.

The short intercalated ducts and small number of striated ducts in the hamster submaxillary gland are structurally very similar to the same ducts of the hamster parotid gland. Since striated and intercalated ducts are much longer and more easily studied in the parotid gland, these structures are reserved for description along with other components of the hamster parotid gland. The granular tubules of the hamster submaxillary gland are composed of simple columnar epithelium with rounded, basally located nuclei. The granules of the apical two-thirds of the cells are of many sizes and shapes and vary considerably in electron density. ER membranes are poorly developed and are not a striking feature of the granular tubule epithelium. Conversely infoldings of the plasma membrane are numerous and are topographically intimate with large numbers of mitochondria (figs. 9-10). As pointed out by Rhodin ('58) in regard to the kidney tubules, and by Parks ('61) in reference to the striated ducts of the mouse parotid gland, the infoldings may represent complex interlockings of adjacent epithelial cells. In the region of the

nucleus the infoldings appear to branch, anastomose and form highly complex configurations. Close to the apex of the granular-tubule cell numerous vesicles are observed which appear to be derived from "pinched off" portions of the double infoldings of the plasma membrane. A well developed system of Golgi membranes is frequently present in a position apical to the nucleus of granular tubule cells (fig. 11). This observation is contrary to the findings of Scott and Pease ('59) who report the presence of Golgi membranes at the base of the cell only and away from the granule formations. In hamster granular tubules a Golgi complex is occasionally observed in positions either apical or basal to the nucleus.

Acinar cells of the submaxillary gland of the antelope squirrel contain secretory granules which are slightly more electron dense than those of hamster submaxillary acini. Characteristic nuclear chromatin aggregations which are striking in light micrographs of salivary glands from the desert rodents (figs. 1-2) are also very prominent in electron micrographs (fig. 12). The chromatin aggregates are Feulgen positive and are present in all tissue preparations regardless of fixation. In contrast to the hamster submaxillary acini of antelope squirrel exhibit only scattered ER membranes. The ER membranes and associated RNP particles are frequently located in close association with secretion granules at the base of the acinar cells but the same membranes are rarely even seen in a definite parallel array. A few mitochondria, a diffused type Golgi membrane system, and intercellular canaliculi are also present. Occasionally small nerve "terminals" can be observed between the basal portions of adjacent acinar cells. Frequently the basal plasma membrane appears to "infold" and form highly complex smooth membrane systems within the acinar cells (fig. 13). This arrangement of smooth membranes is rarely encountered in the salivary gland acini of the hamster.

Intercalated ducts of submaxillary and parotid glands of antelope squirrel are characterized by low cuboidal epithelium with very little evidence of secretory activity. ER membranes and Golgi membranes

are poorly developed and are not a striking feature of the intercalated duct cell (fig. 14). Plasma membranes of adjacent cells form interdigitations at their basal aspect and desmosomes are located toward the cell apices. Mitochondria, having no particular orientation within the cells, are present in moderate numbers.

Striated ducts of the submaxillary and parotid glands of the antelope squirrel contain large numbers of mitochondria which are closely related to infolded plasma membranes (fig. 15). Golgi membranes are poorly developed in comparison with those of the granular tubules. Desmosomes are frequently observed which attach the apices of neighboring cells. The apical cytoplasm usually contains numerous vesicles or vacuolated areas and the lumen of the striated duct is characterized by many microvillous-projections.

Light microscopy of desert rat and antelope squirrel parotid glands. Parotid glands of desert rats (fig. 3) are not remarkably different from those of previously described rodents (Shackelford and Klapper '62c). The principal exception to this similarity would be the "pawn ball" nuclei present in the salivary glands (as well as in certain other exocrine glands) of both the desert rat and the antelope squirrel. Acini of desert rat parotid glands

typical with respect to the well defined zone and the PAS positive Alcian blue negative reactions in the secretory granules. Intercalated ducts composed of flattened cuboidal non-granular epithelium connect the acini with the striated ducts. The striated ducts are typical and exhibit some PAS staining which is not digestible with diastase.

Parotid glands of the antelope squirrel are characterized by a very strong PAS reaction in the acini (fig. 4). The PBSA reaction produces a dark green coloration of the acini when stained with 0.01% toluidine blue at pH 2.8. The Alcian blue reaction is negative in all the parenchymal elements of the parotid gland of the antelope squirrel. Intercalated and striated ducts are morphologically similar to those of the submaxillary glands. Occasionally nuclei of the striated ducts are strongly stained with PAS. This nuclear carbohydrate is located between the chromatin

aggregates described previously and is not digestible with diastase.

Ultrastructural comparison of hamster and antelope squirrel parotid glands. Electron micrographs of hamster parotid acini reveal a well developed ER, a discrete Golgi system apical to the nucleus, intercellular canaliculi and secretion granules which are slightly more electron dense than those of the hamster submaxillary gland. The nuclei are oval or rounded in shape and are located at the base of the acinar cells. The secretion granules are, for the most part, limited to cytoplasmic areas apical to the nucleus and they are closely related to the Golgi membranes (figs. 16-17). Mitochondria are typically sparse and basal infoldings of plasma membranes are characteristically absent in the acini of hamster parotid glands. "New endings" located between adjacent acinar cells are frequently observed in hamster parotid glands. These endings closely resemble those reported by Scott and Peck ('59) in the parotid gland of the rat.

Intercalated ducts of the hamster parotid gland possess a moderately well developed ER and few scattered mitochondria. The nuclei are flattened and the apical one-half of the cells contains extremely electron dense secretion granules (fig. 18). The intercalated duct granules are not as irregular in size and shape as those of the granular tubules in the hamster submaxillary gland. The ER membranes and attached RNP particles are arranged in a definite parallel array as they are in the acini of the parotid gland of the hamster. Desmosomes are present at the plasma membranes toward the cell apices.

Striated ducts of the hamster parotid gland are composed of simple columnar epithelial cells containing a rounded centrally located nucleus. Apices of the cells contain granules of much smaller dimensions than those of hamster granular tubules. Protoplasmic projections into the lumina are fewer in number and larger than those of the antelope squirrel striated ducts. Desmosomes are present at the plasma membranes of adjacent cell apices. Infoldings of the plasma membrane are a prominent feature of the basal one-half of the striated duct cell. These smooth mem-

ances are topographically intimate with elongated mitochondria whose long axis is predominantly oriented toward the base of the striated duct cell (figs. 19, 20). Structures similar to the lysosomes described by de Duve (50) are occasionally seen scattered among the mitochondria.

Acinar cells of the parotid gland of the antelope squirrel possess a moderately well developed system of ER membranes, a discrete Golgi system, numerous electron dense secretion granules and a moderate number of mitochondria (fig. 22). In lead stained upon sections of the antelope squirrel parotid gland, peripheral nerve end-knots are observable as topographically to adjacent acinar cells (figs. 22, 24).

Secretory granules appear to originate in definite membrane-limited structures in the region of the Golgi complex (figs. 22, 24). This apparent relationship of immature secretory granules and Golgi membranes is not as apparent in the submaxillary glands of either the hamster or the antelope squirrel. Though not as extensive as in the antelope squirrel submaxillary gland acini, smooth membranes are frequently present in the basal aspect of the parotid gland acini of the antelope squirrel. These membranes have definite continuity with the surface plasma membrane of the acinar cells (fig. 25). A well defined lysosome and microvilli are illustrated at the junction of two acinar cells bordering an intercellular canaliculus (fig. 26).

Intercalated and striated ducts of the parotid gland of the antelope squirrel are not remarkably different from those in the submaxillary gland of this animal. As previously mentioned, the striated ducts of the submaxillary gland are much more numerous per unit area than in the parotid gland of the antelope squirrel.

The ultrastructure of interstitial plasma cells. In addition to the usual type of interstitial cells e.g. fibroblasts and mast cells, there are cells present in the salivary glands of most mammals which have a structure very much like the plasma cell. These cells mostly fill in the spaces between adjacent salivary gland acini. The "interstitial plasma cell" is characterized by a rounded, usually eccentrically placed nucleus. The cytoplasm is filled with rough ER membranes which limit very

large vesicles or cisternae (fig. 21). Upon observation of a number of these cells the size of the cisternae varies considerably. Extremely dilated cisternae with the associated ER membranes are frequently seen to be detached from the remainder of the cell. This brief description of the inter acinar cell is included here because of its possible role in the secretory mechanism. In any biochemical analysis of saliva therefore this cell should be considered as a possible source and site of synthesis of certain salivary proteins and other organic compounds.

Comparison of sublingual glands in the desert rat and antelope squirrel. The sublingual glands of the antelope squirrel and desert rat have a similar gross relationship to the submaxillary glands as in certain other rodents e.g. the rat, mouse and hamster. That is, the submaxillary and sublingual glands are enclosed in a common connective tissue capsule and the two glands are separated by a band of irregular connective tissue only. Sublingual glands of both the desert rat and the antelope squirrel are composed largely of mucous acini which react strongly to PBSA, PAS and Alcian blue (figs. 5, 6). Nuclei are typically flattened or oval in shape and lie at the extreme base of the acinar cells. Striated ducts are present and well developed in the sublingual glands of the antelope squirrel and desert rat but only very short intercalated ducts are present. The mucous acini of the desert rat frequently open directly into the striated ducts. Demilunes appear to be totally absent in the antelope squirrel sublingual gland. Conversely in the sublingual gland of the desert rat, there are many acinar cells which stain slightly with PAS and are negative to Alcian blue. On morphological grounds these cells are considered to be demilune formations.

Hyaluronidase and neuraminidase considerably reduce the Alcian blue staining of antelope squirrel sublingual glands. Alcian blue staining which is removed by neuraminidase probably reflects the presence of sialic acid in the mucous acini. Reduction in Alcian blue staining after bull testis hyaluronidase treatment was not totally unexpected since sulfated mucopolysaccharides (chondroitin sulfates A

or C) are sometimes in the sublingual gland acini of other mammals. One possibility that should be considered in the enzymatic digestions is the presence of proteolytic enzyme in sufficient quantity to give non-specific results.

Comparison of amylase and electrolyte secretions in the rodents. From the data included in table 1 it is clear that most rodent submaxillary glands (unstimulated and obtained from animals fasted for 24 hours prior to experiment) are consistently low in amylase levels. This is true for submaxillary glands of the rat, mouse, hamster, desert rat and antelope squirrel where values lie in the range of 0.01 to 0.25 mg reducing substance per mg gland. Conversely amylase levels in the parotid glands are consistently high and range from 55 to 87 mg/mg gland in the desert rat to as high as 500 mg/mg gland in the antelope squirrel and 600 mg/mg gland in the Long Evans rat (Schneyer and Schneyer '60b). The guinea pig is the only rodent thus far studied where a high amylase level is found in the submaxillary as well as in the parotid glands (Schneyer unpublished data).

The pattern of Na and K secretion by the submaxillary glands of rat (Schneyer and Schneyer '60a), hamster, desert rat and antelope squirrel (table 1) is generally ¹¹⁷ with saliva distinctly hypotonic to serum produced in each case. In general,

following stimulation of the glands by a parasympathomimetic agent, pilocarpine, Na is low (usually below 25 meq/l) and K high (about 48 meq/l). Only in the case of submaxillary saliva of the mouse is this pattern somewhat altered, for, while Na levels are again similar to those of the rodents already mentioned, K is consistently high (initially) and the submaxillary saliva of mouse begins to approach isotonicity. The saliva from parotid gland of the mouse, desert rat (table 1) and Long Evans rat (Schneyer and Schneyer '60a) exhibits high levels of Na (initial values for Na range from an average of 96 to 142 meq/l) and is isotonic, or nearly isotonic with serum. Na in parotid saliva of the hamster and antelope squirrel is, on the other hand, comparatively low, (initial levels in hamster range from 7 to 35 meq/l) while those of parotid saliva of the antelope squirrel range from 43 to 62 meq/l. K of parotid gland saliva is high in the hamster (average initial value of 96 meq/l) and relatively low in the mouse, desert rat, and antelope squirrel (K values range from an average initial level of 21 meq/l in the desert rat, which is similar to levels reported for the Long Evans rat (Schneyer and Schneyer '60b), to 36 meq/l in the mouse). In considering the sum of the two chief cations (Na plus K) of the salivas of parotid glands the mouse, desert rat and Long-Evans rat

TABLE 1
Amylase levels of rodent salivary glands and electrolyte levels of the salivary secretions

Animal	Submaxillary glands			Parotid glands		
	N meq/l saliva	K meq/l saliva	Amylase mg/mg gland	N meq/l saliva	K meq/l saliva	Amylase mg/mg gland
Mouse	23 ± 4 (3) 17 ± 6 (3)	103 ± 5 (4) 73 ± 10 (3)	0.10 ± 0.19	96 ± 17 (3) 117 ± 13 (7)	36 ± 7 (5) 19 ± 5 (5)	153 ± 19 (7)
Hamster	17 ± 11 (5)	46 ± 3 (3)	0.04 ± 0.01 (8)	14 ± 16 (3) 32 ± 12 (4)	96 ± 22 (3) 54 ± 18 (4)	114 ± 18 (4)
Desert Rat	27 ± 14 (3)	66 ± 19 (3)	0.07 ± 0.03 (7)	142	21	79 ± 17 (4)
Antelope Squirrel	23 ± 7 (3)	38 ± 9 (3)	0.05 ± 0.05 (4)	51 ± 10 (4)	33 ± 4 (4)	176 ± 18 (4)

Values presented in each case are means ± standard deviation; number in parentheses refers to number of animals. The values for Na and K were determined on saliva samples obtained immediately after initiation of flow following intraperitoneal injection of pilocarpine, where second value is also presented, each value refers to samples obtained 3 min to 8 min after initiation of flow. Amylase is expressed as mg reducing substance (as glucose) per mg of tissue.

Data not included here on the rat may be found in the published papers of Schneyer and Schneyer ('60, '60).

Range of average values for several strains of mice (Schneyer, '63). Only single values here obtained.

reduce isotonic secretions whereas the rodent salivas of the hamster and antelope squirrel are hypotonic.

DISCUSSION

In comparing the salivary glands of the desert rodents with those of common laboratory rodents it appears that the similarities are more striking than the dissimilar characteristics. The salivary glands of the desert rat, for example, are morphologically histochemically and physiologically closely related to the salivary glands of the white mouse, and laboratory rat. More specifically desert rat and white mouse salivary glands have submaxillary gland duct which histologically and histochemically may be classified as seromucous. In the male, large granular tubules occupy most of the submaxillary gland parenchyma. Very low amylase levels are present in the submaxillary glands of white mouse laboratory rats (Schneyer and Schneyer '58 '60a, '60b) and desert rats, while relatively high levels of this enzyme are demonstrable in the parotid glands. Potassium (K) is high in the submaxillary gland saliva whereas sodium (Na) is high in the parotid glands of these animals. The sublingual glands are composed predominantly of mucous-secreting acini.

Parotid gland amylase levels are consistently high in all rodents thus far tested. The guinea pig is the only rodent which exhibits a high submaxillary gland amylase (Schneyer unpublished data). There is, to some extent, an inverse relationship between amylase levels and mucous secretions in mammalian salivary glands. This is particularly true in salivary glands in which the diatomucin content is very high. Salivary glands which produce a seromucous secretion and are classified as seromucous glands e.g., submaxillary glands of most rodents (excepting that of the guinea pig) and the parotid glands of the dog and cat, are also reported to be low or lacking in amylase content (Shackelford and Klapper '62c). Exceptions to this relationship are the parotid glands of the cow and sheep which exhibit low levels of amylolytic enzyme in the saliva but yet are classified as serous glands (Shackelford and Klapper '62c; Burgen and Emmelino, '61). Morphological and histochemical

studies are an invaluable aid in classifying salivary glands therefore, but caution should be exercised in making conclusions without the additional information provided from biochemical analysis. Serous acini of most salivary glands, for example, are reactive to the periodic acid Schiff (PAS) method for tissue carbohydrate. The presence of PAS positive material should by no means justify the conclusion that mucins are present. In this regard, however there is admittedly some confusion as to the exact biochemical definition of mucin. If the mucins are considered as protein-carbohydrate complexes in which hexose hexosamine fucose and sialic acid taken together compose about 70% of the molecule (Haehnle and Pigman, '62) then it should be clear that all PAS positive materials in salivary gland epithelial cells are not mucin. In this regard the p-hydroxybenzenesulfonic acid (PBSA) reaction should be of value in estimating the concentration of vicinal hydroxyl groups in the glycoproteins of epithelial cells (Shackelford, '63a).

Electrolyte levels in rodent salivas cannot be predicted with any consistency on the basis of presently available morphological and histochemical methods. Na and K in antelope squirrel parotid saliva, for example, is closer to the electrolyte levels of rat submaxillary glands than it is to most parotid glands. As a result of the high K values and low Na levels in the hamster parotid and in mouse submaxillary gland, the electrolyte secretions of these two glands are similar. The only salivary glands of this study which can be considered to have an isotonic saliva are the parotid glands of the rat, mouse and desert rat. Whereas the salivas of mouse submaxillary glands can be said to approach isotonicity it is evident that all salivas (other than that of the desert rat, mouse and rat parotids) are definitely hypotonic. It should be emphasized at this point that there are no morphological criteria by which electrolyte levels can be estimated. Speculation on transport of electrolytes on the basis of striated duct morphology for example, seems fruitless at this time. In this regard it is interesting to note that children with cystic fibrosis of the pancreas may produce sweat in which

PLATE 1

EXPLANATION OF FIGURES

- 1 Submaxillary gland of the male desert rat. Granular tubules at arrow. Observe close resemblance to male white mouse. Hematoxylin, orange-G aniline blue stain. $\times 640$.
- 2 Submaxillary gland of the antelope squirrel. Granular tubules are absent in this rodent. Typical "pawn ball" nucleus at arrow. Striated duct in lower portion of the picture. Hematoxylin, orange-G, aniline blue stain. $\times 640$.
- 3 Parotid gland of the desert rat. Striated ducts (at arrows) are smaller than those of the antelope squirrel parotid (of fig. 4). Hematoxylin, orange-G, aniline blue stain. $\times 160$.
- 4 Parotid gland of the antelope squirrel. Acini are strongly PAS positive. Striated duct at arrow. Periodic acid Schiff hematoxylin stain. $\times 160$.
- 5 Sublingual gland of the desert rat. Acini exhibit strong acidic carbohydrate staining. Alcian blue-Feulgen stain. $\times 160$.
- 6 Sublingual gland of the antelope squirrel. All acinar cells are the mucous secreting type. Alcian blue-Feulgen stain. $\times 160$.

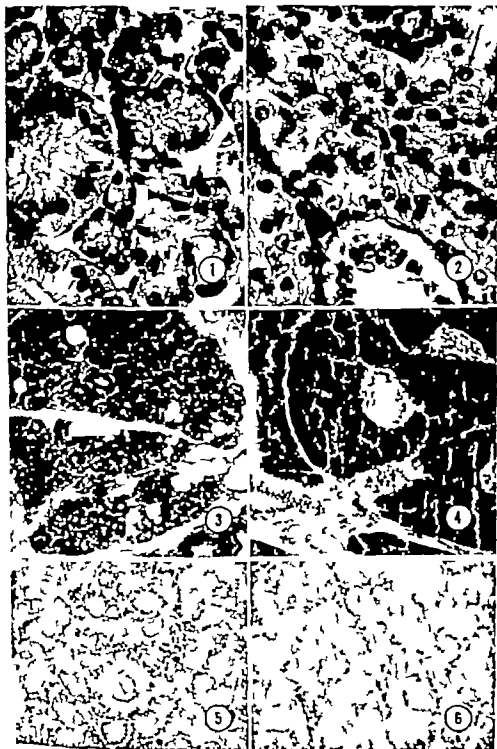


PLATE 2

EXPLANATION OF FIGURES

- 7 Hamster submaxillary gland. Acinar cells containing numerous secretion granules (S) few scattered mitochondria (M) Golgi membranes (G) and granular (rough-surfaced) endoplasmic reticulum (R). Note that the more basally placed secretion granules are closely related to granular reticulum whereas those near the canaliculus (↑ arrow) are related to smooth membranes. Electron micrograph, lead stained upon section. $\times 13,500$
- 8 Hamster submaxillary gland. Secretion granules (S) of acinar cell just apical to nucleus (N). Electron micrograph, lead-stained upon section. $\times 15,000$.

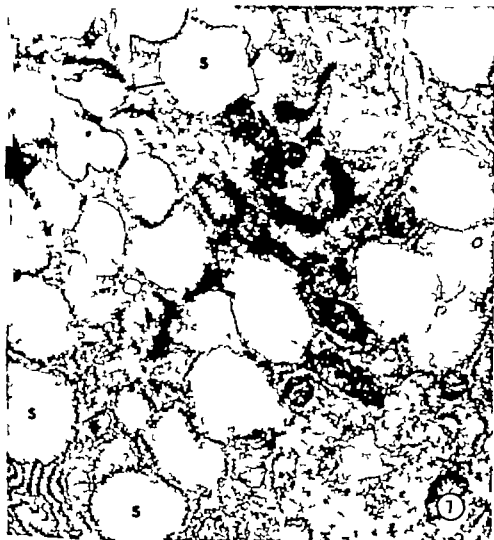


PLATE 3

EXPLANATION OF FIGURES

- 9 Hamster submaxillary gland. Granular tubule epithelium shows an abundance of mitochondria and smooth membranes in basal one-third of cells. Apical two-thirds of cells contain secretion granules of varying size and electron density. Cell with nucleus (N) contains numerous small vesicles in apical cytoplasm. Microvilli project from the apices of some cells into the tubule lumen at right of micrograph. Electron micrograph, lead stained epom section. $\times 4,000$.
- 10 Hamster submaxillary gland. Picture illustrates intimate relationship of infolded plasma membranes and mitochondria in basal portion of granular tubule cell. Electron micrograph, methacrylate section. $\times 40,000$.
- 11 Hamster submaxillary gland. Golgi membranes + apex of granular tubule cell nucleus. Electron micrograph, methacrylate section. $\times 32,000$.

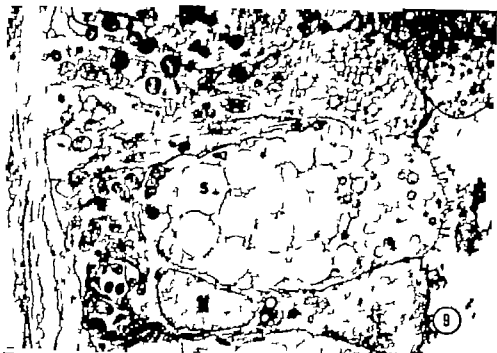


PLATE 4

EXPLANATION OF FIGURES

- 12 Antelope squirrel submaxillary gland. Acinar cell contains numerous secretion granules (S) and an extensive system of Golgi membranes (G). Granula reticulum (R) is sparse. Electron micrograph, lead stained epon section. $\times 9,000$
- 13 Antelope squirrel submaxillary gland. Picture III strates basal folds of plasma membrane (4 arrows) in an acinar cell. Electron micrograph lead stained epon section. $\times 33,000$

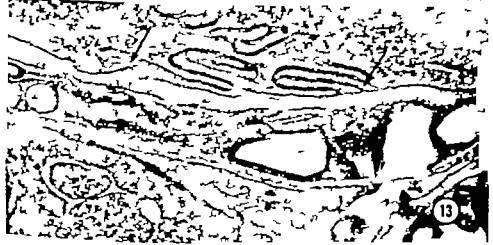
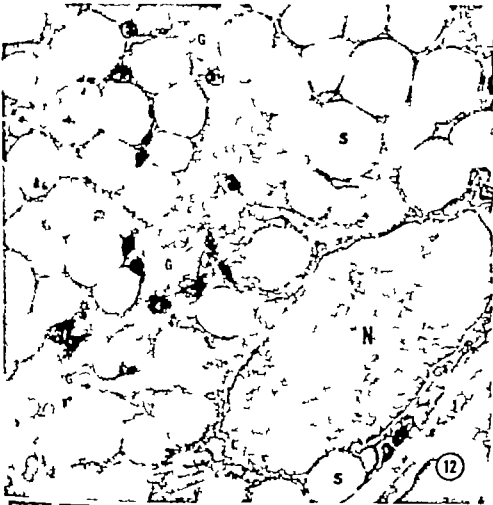


PLATE 6

EXPLANATION OF FIGURES

- 16 Hamster parotid gland. Notice abundant granular reticulum in portions of acinar cells. Canaliculus above nucleus at left is studded with microvilli. Structure at arrow containing two small mitochondria is probably a nerve ending. Electron micrograph lead stained epon section $\times 10,500$.
- 17 Hamster parotid gland. Portions of acinar cell to illustrate close relationship of granular reticulum to Golgi membranes. Membranes of the granular reticulum appear to converge toward the Golgi region right of center. Electron micrograph, lead stained epon section. $\times 33,000$



PLATE 7

EXPLANATION OF FIGURES

- 18 Hamster parotid gland. I tercalated duct cells show secretion granules (B) of much greater lectron density than those of acinar cells. Luman of duct is left of center in upper portion of micrograph. Electron micrograph lead stained epon section. $\times 6,000$
- 19 Hamster parotid gland Base f striated duct illustrates continuity of plasma membrane with smooth membranes within the cell. A small nerve fiber accompanies the blood vessel in lower half of micrograph. Electron micrograph lead stained section. $\times 15,000$



PLATE 8

EXPLANATION OF FIGURES

- 20 Hamster parotid gland. Tangential section through striated duct to show abundance of mitochondria and their intimate relationship to smooth membranes. Electron micrograph, lead stained epox section. $\times 7,500$
- 21 Hamster parotid gland. Micrograph illustrates typical morphology of an interstitial "plasma cell. Nucleus (N); Cisterna (C); Golgi region (G). Electron micrograph, lead stained epox section. $\times 21,000$.

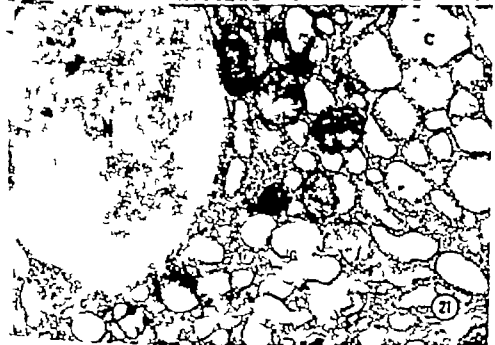
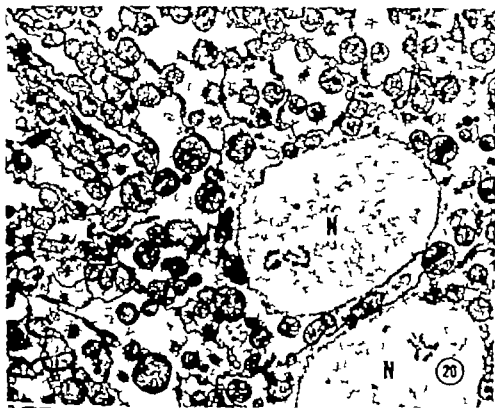


PLATE 9

EXPLANATION OF FIGURES

- 22 Parotid gland of the antelope squirrel. N is relationship of nerve ending" (at arrow) between two acinar cells. Acinar cells exhibit sparsely distributed granular reticulum and abundant secretion granules (S) Note relationship of "immature secretion granules to Golgi membranes (G) Electron micrograph, lead stained upon section. $\times 7,000$
- 23 Higher magnification of Golgi region in lower right corner of figure 22. $\times 16,000$.
- 24 Higher magnification of nerve ending" in figure 22. Note "synaptic vesicles and small mitochondrion. $\times 32,000$.



PLATE 10

EXPLANATION OF FIGURES

- 25 Parotid gland of the antelope squirrel. Acinar cell show smooth membranes which are continuous (at arrows) with the basal plasma membranes. Electron micrograph, lead stained epon section. $\times 44,000$.
- 26 Parotid gland of the antelope squirrel. Portions of two adjacent cells close to an intercellular canaliculus. Note microvilli projecting into the lumen and desmosomes (t arrow) Electron micrograph of lead stained epon section $\times 40,000$.



Morphological and Histochemical Observations on Trophoblast and Decidua of the Basal Plate of the Human Placenta at Term¹

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ABSTRACT The trophoblastic cells of the basal plate at the end of pregnancy still have an important hormonal function, in contrast to the decidua cells which appear to exert their main function at the onset of pregnancy. Possibly the decidua cells are functionally replaced by the basal trophoblastic cells, which phagocytize and destroy them. Although both types of cells are structurally quite similar and appear to produce the same hormones but at different times, genetically they are very different. They degenerate morphologically in much the same way but the cause for the retrogressive change for each is distinct. The trophoblastic cells degenerate with reticulo-fibrinous inclusions which they have mainly phagocytized. The decidua cells perish with collagen inclusions formed from collagen fibers they in turn produced.

The possibility that the placenta might be active endocrinologically was first suggested with Halban's discovery ('05) that a human pregnancy could persist following ovariectomy. Although in the decades following Halban's publication the histology of the placenta was exhaustively studied, morphological identification of placental hormones proved unsuccessful.

During the last few years the morphological study of the placenta has been stimulated by the biochemical demonstration of a group of hormones in the placenta itself or in maternal or cord blood. The greatest attention has been given the trophoblastic layer of the villi with the result that one now is able with fair assurance to localize in the syncytium the presence or formation of steroids (without differentiating between estrogen and progesterone) gonadotropin, and growth hormone. Estrogen and progesterone were most likely demonstrated histochemically (Wlodocki and Bennett, '43; Dempsey and Wlodocki, '44; Ashbel and Hertig '52). Although the histochemical reactions for ketosteroids are not entirely specific (Karnovsky and Deane, '55) the recent demonstration of steroid 3 β -O-dehydrogenase in the syncytium by Deane offered further proof for the presence of these steroid hormones. Nevertheless the two hormones are still not specifically identifiable. Estrogen was also detected in the aqueous humor of

rabbit eyes in which placental tissue had been transplanted but in which only the syncytium had survived (Stewart, '51); it was found as well in the media of in vitro cultures of syncytium from late pregnancies (De Clerck, '58). Recently gonadotropin was demonstrated immunohistologically in the syncytium (Midgley and Pierce '62) and also in the amnion and in small amounts in the chorionic plate (Thiede and Choate '63). A growth hormone, prolactin like substance was also detected immunohistologically in the syncytium (Sciarrà et al., '63). Corticosteroids (Johnson and Haines '52; De Courcy et al. '52) and relaxin (Zarrow et al., '55) were detected biochemically in maternal blood. That ACTH is present in maternal blood was strongly suggested by Jailer and Knowlton ('60).

Which cells of the placenta, because of their fine structures might produce hormones? Fujisawa ('21) pointed out that the syncytial and cytotrophoblastic cells, as well as the large and small decidua cells, display the morphological prerequisites for the formation of hormones. Wlodocki ('51) was the first to draw attention to the high metabolic activity in respect to protein formation of the basal trophoblastic cells, especially at the end of preg-

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nancy. Because the abundant RNA in these cells represented a prerequisite for protein synthesis, he also suspected gonadotropin was formed in these cells. Ortman (55), Bargmann and Knoop (59) and Weber (61) again pointed out that the basal trophoblastic cells, because of these special features, were especially adapted for the synthesis of hormones. Wislocki (73) and Latta and Beber (77) demonstrated in the basal trophoblastic cells protein-bound SH-groups which they interpreted as evidence of the formation of ACTH or gonadotropin. Furthermore, Thomsen and Willersen (59) believed that the PAS positive substances demonstrated in these cells at the end of pregnancy even after diastase digestion might represent a formation of gonadotropin. Since the basal trophoblast of the entire placenta has a volume of about 1.8 cm³ more than twice the size of the pituitary, it may be regarded in respect to its mass as an important endocrine gland (Ortman 55).

As is evident from table 1, enzymes, lipoids, polysaccharides, RNA and protein-bound SH groups have been localized histochemically in various placental cells. One does not know, however, whether these substances are important for the metabolism of the cells for the production of hormones or for the fetus. Consequently, we have compiled from the world literature on the one hand, the results of studies on the basal plate (see table 1) and on the other hand, have attempted to fill in some of the gaps by our own studies (see table 2). In addition to the basal trophoblastic cells, our interests concern the decidua cells as well, for in the basal plate they are often in close relation to the trophoblast.

MATERIALS AND METHODS

We studied 92 human placentae, 22 were obtained from spontaneous deliveries at term, 31 were from Caesarean sections at or near term but mostly prior to the onset of labor, three were from forceps deliveries at term, one from the sixth month, six from the fifth month, 20 from abortions at the second-fourth month and nine from curettements in the first month. The placentae from Caesarean sec-

tions performed prior to the onset of labor seemed to us to guarantee the best possible preservation of the morphology of the mature placenta, for under these conditions one would not expect hormones or other active substances needed for the onset of labor or delivery to have been discharged already. A few placentae which were obtained by Caesarean section after the onset of labor served for comparison but are included in the 92 specimens.

The placental material, obtained shortly after delivery or operation and still warm, was cut into blocks 3 mm thick and either fixed in 10% formalin (Carnoy's, Bouin's, San Felice's) and basic lead acetate or frozen in a petroleum-ether bath at minus 70 C. Paraffin embedded and frozen sections respectively were made at 4 μ , and histological and histochemical methods carried out (table 2).

The isoelectric points of various cell structures were determined with both methylene blue and orange G at graduated pH's (after Pischinger) and compared with the fluorescence microscopic method with acridine orange (after Schimmelfeder and Stock).

The histologic staining techniques performed were: hematoxylin-eosin, Leishman's phloxine-tartrazine, azan after Heidenhain, kresazan after Romelschue, hematoxylin-phloxine after Gomori, Masson's trichrome stain; Pentachrome after Movat, reticulum stain of Gomori, PAS, fibrin stain of Weigert.

Histochemical reactions: Gomori's aldehyde fuchsin stain; Sudan black B; Lugol's fast blue after Pearce; PAS reaction with and without diastase; toluidine blue after fixation in formalin and in 0.4% basic lead acetate; Alcian blue at pH 2.8 and 1.0; Astra blue after Ploech (with 0.5% solution of Astra blue in 2-3% tartaric acid); mucicarmine; Feulgen; galloyanilindine-malum; acridine orange at pH 4.8 and 6.0 before and after RNase digestion (after Schimmelfeder et al. modified by Dalenbach); methyl-green-pyronin according to Taft; and tetrazolium reaction before and after benzylation and after diisothiobenzene demonstration of SH-groups after Chèvremont and Frédéric (after Fischel) after Adams (specific for cystin, see Pearce) and after Barnett and Sellgrann (the re-

TABLE 1

Compilation of results from the world literature of studies on the cells of the basal plate

	Trophoblastic cells	Large decidual cells	Small decidual cells
Mitochondria	+ (Wislocki, '51)	- (Fujimura, '51)	+ (Fujimura, '51; Baker et al., '44)
Nuclear inclusions	+ (Ortmann, '55)		
	- (Wislocki, '51; Thomsen, '55; McKay Hertig et al., '58)	(+) (Wislocki, '51)	+ (Thomsen, '55)
Alkaline phosphatase		- (McKay Hertig et al., '58)	
	- (Wislocki, '51)	+	
Acid phosphatase	-+ (Thomsen, '55)	(Dempsey '48; Thomsen, '55; Strauss, Hiersche '62)	
	(+) (McKay Hertig et al., '58)		
Esterase	+ (Wislocki, '53; McKay Hertig et al., '58)	- (Zacks, Wislocki, '53; McKay Hertig et al., '58)	+ (Zacks, Wislocki, '53)
S-Nucleotidase	+ (Thomsen et al., '58; McKay Hertig et al., '58)	- (Thomsen et al., '58; McKay Hertig et al., '58)	
Secondo dehydrogenase	+ (Wislocki, '53; Ortmann, '55)		
		+ (Fujimura, '51)	
		(+) (Wislocki et al., '48)	
Lipids	- (Wislocki, '51)	Sudan black B -	
	(+) (Thomsen et al., '56)	Baker test -	
		Nile blue +	
		Osmium +-	
		polarized light -	
			Ortmann '55
	+ (Drissen, '57; Flaech, '51; Wislocki, '51; McKay Hertig et al., '58; Thomsen, '54)	+ (Baker et al., '44; Ortmann, '55; Wislocki et al., '58; McKay Hertig et al., '58; Snowdigh, Tranb, '62)	+ (Baker et al., '44)
Glycogen			
	+ (Ortmann, '49; Wislocki, '51; Thomsen et al., '59; Lewin, '60)	- (Latta, Beber '57)	+ (Wislocki et al., '48)
Diestase resistant polysaccharides			
	+ (Dempsey Wislocki, '45; Ortmann, '49; Wislocki, '51; McKay Hertig et al., '58; Weber '61; Bleyl, '62)	(+) (McKay Hertig et al., '58)	+ (Wislocki, Dempsey '48)
		- (Dempsey Wislocki, '45)	
Ribonucleic acids			
	+ (Wislocki, '53; Latta, Beber '57)		
Protein bound SH groups			
Alcian blue granules			+ (Baker et al., '44)

action for non-specific esterase with -naphthylacetate according to Pearse; and from reaction with Prussian blue. From time to time we used several different modifications of one histochemical reaction and have tabulated therefore, only that method which seemed to us to be the most suitable for the placenta. At all times sections were stained with appropriate control methods (see Pearse). Besides the original method for toluidine blue sections were left in the 0.1% solution until definite overstaining was evident in order to obtain permanent preparations after rapid dehydration.

RESULTS

(1) Trophoblastic cells

Even in H. & E. sections one may recognize the trophoblastic cells in the basal plate by their dense basophilic granular cytoplasm and by their large nuclei. In general, these cells are round; only where they penetrate the decidua are they chiefly spindle-shaped, with rather long processes, none of which appear to communicate with one another. With the reticulum stain the trophoblastic cells may be especially well differentiated from the decidua cells occasionally crowded about them. Whereas each individual decidua cell is enveloped by reticulum fibers the trophoblastic cells lie free in the ground substance. This difference was also observed by Wislocki and Bennett (43). In addition, with the azan stain the trophoblastic cells may be readily recognized by their granular dark brown cytoplasm in contrast, the cytoplasm of the decidua cells is bright gray.

The nucleus of the trophoblastic cell is outlined by an irregularly wavy membrane. Besides coarser clumps of chromatin, the nucleus contains 1-2 prominent nucleoli, which react positively with methods for RNA (bright red with methyl green-pyronin, orange-red with acridine orange from pH 3.4 to 8.0 negative after RNase digestion at pH 4.8 and 6.0). The majority of the nucleoli abut against the nuclear membrane. At times they may even protrude into the cytoplasm without a recognizable nuclear membrane intervening, as if they were being extruded from the nucleus. There are furthermore rounded structures within occasional nu-

clei which closely resemble large nucleoli, but which fail to stain for RNA. We refer to them as nuclear inclusions. They may become so large that they occupy most of the nucleus (fig. 3A). In rare nuclei, vacuoles may be identified, some of which contain a small inclusion.

The cytoplasm of most of the trophoblastic cells is especially rich in RNA appearing from coarse to finely granular. Occasionally this RNA is accumulated in the periphery of the cell, but at other times it is concentrated in the paranuclear region. Consequently these cells are strongly basophilic. Their cytoplasm also contains diffusely scattered esterase-positive particles (fig. 1). In addition, a large proportion of these cells contains numerous vacuoles, distributed like a string of beads at the periphery of the cytoplasm. Among this type of trophoblastic cells in the basal plate there are occasional groups of other rounded cells with less cytoplasm which appears optically empty by the usual histological stains (fig. 2A). This "clear cell" type of trophoblastic cell resembles most closely the young cytotrophoblastic cells of the cell columns at the beginning of pregnancy. With special stains these clear cells contain abundant dense homogeneous substances in droplet form that are PAS-positive, digestible with diastase, alcian blue-negative and non-metachromatic thus representing glycogen (see fig. 2B).

If further special stains are employed, one may recognize in the basophilic trophoblastic cells several different types of cytoplasmic inclusions.

(a) The most prominent inclusions are homogeneous, intensely refractive round intracytoplasmic particles, mostly of the approximate size of a nucleolus (fig. 3C) but sometimes as large as the nucleus (fig. 3B). Their histochemical and staining reactions are compiled in table 2. It is evident therefrom, that the inclusions are strongly acidophilic and, in the absence of lipoids and polysaccharides consist of proteins apparently without a prosthetic group. With the reticulum stain these pure protein inclusions are enclosed by a thin black shell. Some of them are located in vacuoles, as if they were becoming liquefied or being formed. Others are situated in the paranuclear region among the RNA gran-

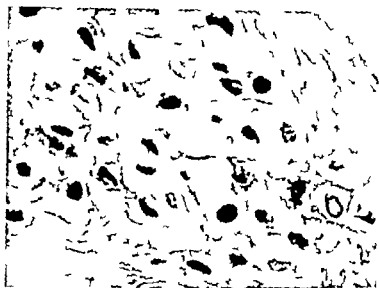


Fig. 1 Term placenta of spontaneous delivery. Esterase positive granules in the trophoblastic cells of the basal plate. Esterase reaction. Magnification $\times 615$.

ules and still others are distributed randomly throughout the cytoplasm. Some of the nuclear inclusions described above (fig. 3A) give the same staining reactions for more detail see Dallenbach Hellweg and Netto (63a).

These pure protein inclusions must be differentiated from indistinct, finely granular intracytoplasmic particles which are found in some basophilic trophoblastic cells and which may be detected only with the reactions for fibrin. These particles are most frequently observed near large clumps of fibrin whereas in the fibrin-deficient regions they are absent. In contrast to the protein inclusions the fibrin particles are strongly positive for SH groups with the method of Chôvrement-Frédéric.

(b) Following diastase digestion some of the basophilic trophoblastic cells are found to contain round or angular PAS positive basophilic inclusions which are also Alcian blue positive at pH 2.6 negative at pH 1.8 and non-metachromatic. In addition they react positively with tetrazolium salt with the method of SH groups (4). In the absence of metachromasy a positive reaction without metachromasy cannot be observed. Therefore the presence of S Scott and

Hence histochemically these inclusions seem to consist of glycoproteins containing a neutral mucopolysaccharide and a basophilic protein the latter being responsible for the low isoelectric point. These glycoprotein inclusions are generally smaller and more frequent within a cell than the pure protein inclusions (fig. 4A). They lie often within vacuoles, paramuclear or diffusely scattered in the cytoplasm and some may even be in the nucleus (for detail see Dallenbach-Hellweg and Netto (63b)).

The glycoprotein inclusions are to be differentiated from irregularly cream-colored particles which may be randomly dispersed throughout the cytoplasm of occasional basophilic trophoblastic cells. These latter particles even the smallest, are distinctly impregnated with the methods for reticulum and some also stain blue with the azan and Masson trichrome methods. Since however the silver stains have not been proven to be specific for reticulum, we are cautious in interpreting their true nature. In contrast to the glycoprotein inclusions they are never seen within vacuoles.

(c) In some basophilic trophoblastic cells one may distinguish deep invaginations of the cell membrane into the cytoplasm. Some of these indentations may be so large that they almost replace the

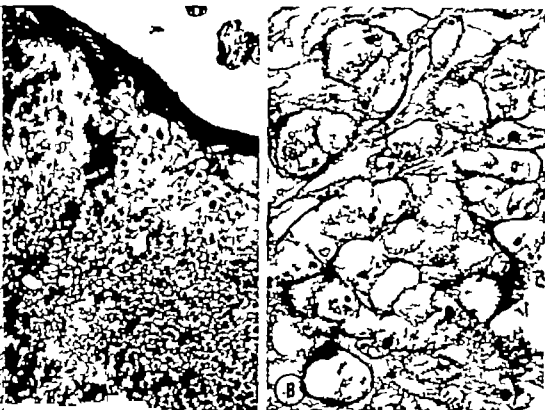


Figure 2

A Cross section through basal plate of term placenta of forceps delivery. At upper right intervillous space; at upper half basophilic trophoblastic cells; at lower half the "clear" trophoblastic cells. Papan-Tartrazin stain. Magnification $\times 132$.

B "Clear" trophoblastic cells with intracytoplasmic PAS positive droplets. PAS stain. Magnification $\times 640$.

trophoblastic cell, hence the cell, appearing as a ghost, can be identified as such only by its outline. These invaginations may contain variable amounts of fragmented reticulum fibers in a "fibrinoid" ground substance. Thus, in tangential sections they may be confused with the intracytoplasmic reticulum inclusions mentioned above. One is able, however, to differentiate the "fibrinoid" inclusions by their membrane-like outline representing the indented membrane of the cell. These invaginations are generally broad-based, or they communicate by a narrow stalk of ground substance with that surrounding the cell (Fig. 5A). Although the ground substance consists chiefly of fibrinoid it contains as well fine fragments of destroyed reticulum fibers and in contrast to

fibrinoid in other parts of the body it stains like collagen. These "fibrinoid" inclusions, indeed, resemble closely the collagen inclusions of the decidual cells (Hamperl, '58; Dallenbach-Hellweg, '61). These two types of inclusions may be differentiated from each other, however, by noting the type of cells in which they are located — whether trophoblastic or decidual.

Occurrence of the inclusions Of interest is the fact that the pure protein inclusions in the trophoblastic cells are found almost exclusively in those placentae which are obtained by elective Caesarian section prior to the onset of labor. In contrast the placentae of the Caesarian sections carried out after several hours of labor and those of the spontaneous de-

sons of the basal trophoblastic cells are synthesized in the cell, most likely in the paranuclear region of the endoplasmic reticulum where the smallest inclusions can always be found. Since some are located in vacuoles they may very well be secreted from the cell by means of liquefaction processes. From all the results discussed it seems sensible to regard the intracytoplasmic and intranuclear pure protein and glycoprotein inclusions as the morphological representation of hormones; that is, the inclusion could be the hormone itself, or be a nonspecific carrier substance.

Since the pure protein inclusions occur or are formed in the mature placenta shortly before the inception of labor as shown by the studies of placentas obtained by elective Caesarian section but cannot be demonstrated in the placentas delivered following spontaneous labor these inclusions apparently are discharged during the few hours of labor. Therefore logically one searches for an analogue for a similar rapidly disappearing hormone biochemically detectable in the placental blood. *Relaxin* is the only hormone which fulfills all of these conditions. Its chemical structure corresponds significantly with the histochemical results already discussed. We (F. Dallenbach and G. Dallenbach-Hellweg) have carried out immunohistological studies with fluorescein-labeled rabbit anti-relaxin serum using the Coombs-Kaplan technique. We were able to show that the pure protein inclusions of the basophilic trophoblastic cells and the granules of the endometrial granulocytes of the early decidua react positively with the antisera, while all the controls were negative. Hence we believe that these inclusions do represent relaxin or its carrier substance (for detail see Dallenbach and Dallenbach-Hellweg '63). This observation appears to confirm the hypothesis that the same hormone can be found and probably synthesized in different cells and at different times.

One might, in addition, propose as so many authors before us have assumed, that the glycoprotein granules in the basophilic trophoblastic cells represent remnants of gonadotropin. Their location is identical with the immunohistological lo-

calization of gonadotropin in the syncytium by Midgley and Pierce and in syncytium and amnion by Thiede and Choate. One might assume furthermore that the granules of the small decidual cells which also contain glycoproteins, represent gonadotropin as well a non-specific glycoprotein here, however would have to be excluded. The possibility still remains, that these small decidual cells actually represent trophoblastic cells which have migrated into the decidua. The reticulum fibers enveloping them, however support the contention that they are of decidual origin. These cells could very well be of the same kind as the small decidual cells mentioned by Wislocki and Dempsey ('48). In contrast, we believe that Fujimura ('21) and Baker et al. ('44) have seen the endometrial granulocytes for they described small decidual cells with pyknotic nuclei, numerous mitochondria, and acid-fuchsin stainable granules in the nuclear indentations.

In all likelihood the large decidual cells have no important hormonal function at the end of pregnancy. Our results agree with those mentioned (Fujimura '21, Baker et al., '44, Ortmann, '55, McKay et al., '58, Thomsen '59, Wislocki and Padykula '61). Whether the glycogen substances in the clear trophoblastic cells represent true products of cellular synthesis or are only those of storage is difficult to decide. The clear cells are poorer in RNA than the remaining trophoblastic cells, but show prominent nucleoli and disclose no degenerative changes. One may assume that they have maintained not only the structure of the young cytotrophoblast of the cell columns, from which the trophoblastic cells of the basal plate are thought to be developed (Wislocki and Padykula) but have retained as well their original content of glycogen. On the other hand the basophilic trophoblastic cells, which are occasionally multinucleated might very well be derived from or have a close relation to the syncytial cells of the villi which invade the decidua to form the basal plate. The syncytial cells of the villi and the basophilic trophoblastic cells of the basal plate apparently represent differentiated cells of the trophoblast capable of producing hormones.

The *fibrinoid* inclusions apparently represent the onset of degeneration of trophoblastic cells. The complete destruction of these cells, like that of the decidual cells caused by the collagen inclusions can be similarly followed step by step. If we look for an explanation for the formation of the fibrinoid inclusions two processes appear to be significant: (1) It seems logical to assume that the trophoblastic cells on invasion of the decidual tissues phagocytize the remnants of the fragmented reticulum fibers (see also Hertig and Rock, 41; Hertig et al '58). It would then be conceivable that in aging trophoblastic cells this debris of reticulum and *fibrinoid* substance piles up gradually until excessive accumulation causes the cell to degenerate slowly. (2) In addition there seems to be another process that plays a role. In this a collapse is passively induced in some of the aging trophoblastic cells by the encroachment of the *fibrinoid* ground substance against the cell to form invaginations which eventually compress the cell. The degeneration of the basal trophoblastic cells appears to be enhanced by either or both of these two processes although it should be pointed out that only very few trophoblastic cells at term have undergone marked degeneration. On the contrary most are as we have shown above highly active at the end of pregnancy.

The collagen inclusions of the decidual cells appearing so similar to the fibrinoid inclusions of the trophoblastic cells develop without doubt by another means (see Wessel '59; Dallenbach-Hellweg '61) especially since the decidual cells are capable of producing collagen fibers and are imbedded in an intact collagen-reticulum ground substance.

CONCLUSIONS

At the end of pregnancy the trophoblastic cells of the basal plate are still highly active in protein synthesis. Their nuclei contain prominent nucleoli and occasionally inclusions and vacuoles. Their basophilic cytoplasm is very rich in RNA in protein-bound SH groups, in different enzymes and in peripherally located vacuoles. With special stains one may recognize different types of cytoplasmic inclu-

sions: (1) intensely refractive round protein inclusions, (2) diastase resistant PAS positive particles (glycoproteins) and (3) fibrinoid inclusions. Groups of decidual trophoblastic cells containing glycogen may be differentiated from the numerous basophilic trophoblastic cells in the basal plate.

The decidual cells at term appear inactive. Only occasional glycogen granules are found within them, but many collagen inclusions. Amongst these decidual cells there are a few granulocytes with protein granules, as small cells with PAS positive granules resistant to diastase (glycoproteins). The pure protein inclusions of the basophilic trophoblastic cells undoubtedly are found within the cell. These inclusions as well as the granules of the endometrial granulocytes, have been shown by immunohistological studies to represent relaxin. The glycoprotein inclusions in the basophilic trophoblastic cells may be related to the formation of gonadotropin. This might possibly hold true also for the glycoprotein granules of the small decidual cells. The clear trophoblastic cells may be remnants of the cytotrophoblastic cells of the columns, while the basophilic trophoblastic cells appear to be closely related to the syncytial cells of the chorionic villi. Here the basal plate at term apparently retains endocrinologically active derivatives of the syncytiotrophoblast, namely the basophilic trophoblastic cells as well as derivatives of the cytotrophoblast, namely the clear trophoblastic cells. The fibrinoid inclusions in the trophoblastic cells and the analogous collagen inclusions in the decidual cells are regarded as indicating regressive processes.

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PLATE I

EXPLANATION OF FIGURES

- 3A Large nuclear inclusion in basophilic trophoblastic cell of placenta from elective Caesarian section at thirty-sixth week. Phloxine-Tartrazin stain. Magnification $\times 1,200$. (From Dallenbach-Hellweg and Netta, '53a.)
- 3B Large protein inclusion in basophilic trophoblastic cell of basal plate of placenta from elective Caesarian section at thirty-ninth week. Phloxine-Tartrazin stain. Magnification $\times 1,500$.
- 3C Prominent nucleoli and numerous cytoplasmic protein inclusions of the trophoblastic cells of the basal plate of term placenta from elective Caesarian section. Azan stain. Magnification $\times 830$.
- 3D Placenta from elective Caesarian section at 37 weeks gestation. In the middle between large cells of the basal plate an endometrial granulocyte. Phloxine-Tartrazin stain. Magnification $\times 675$.

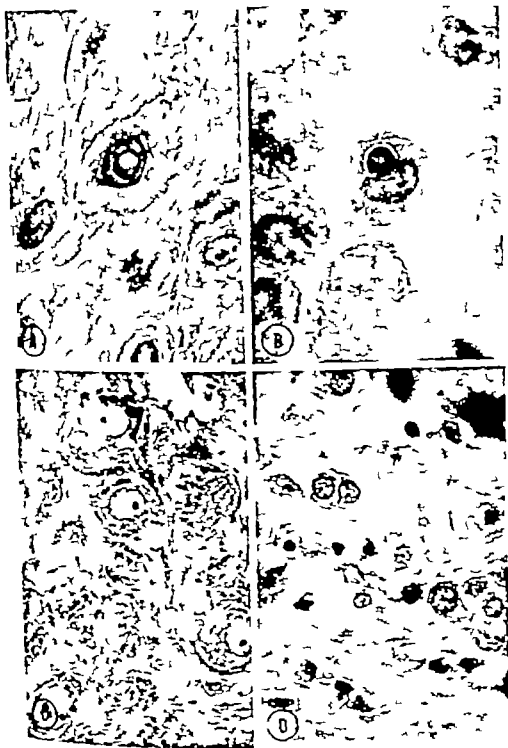
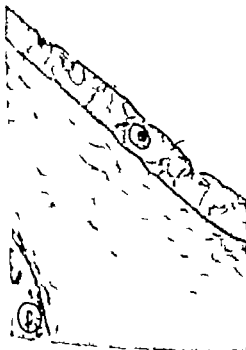
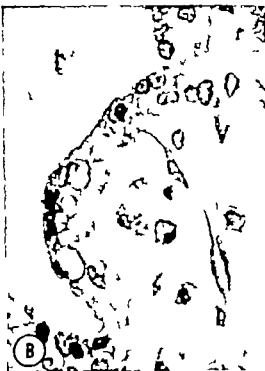


PLATE 2

EXPLANATION OF FIGURES

- 4A Numerous glycoprotein inclusions (black) in basophilic trophoblastic cells of the basal plate of term placenta following spontaneous delivery. Aldehyde-fuchsin stain. Magnification $\times 600$.
- 4B Nine weeks old placenta. Intranuclear vacuoles with glycoprotein particles in the syncytial layer of chorionic villus. Alcian blue stain (only faintly visible in black and white reproduction). Magnification $\times 715$.
- 4C Amnion of a term placenta of spontaneous birth. Vacuole containing glycoprotein inclusions within the epithelial layer. PAS stain after Diastase digestion. Magnification $\times 745$. (From Dellenbach-Hellweg and Netter, '63b.)
- 4D Term placenta. Small decidual cells showing intracytoplasmic PAS positive granules amidst large decidual cells and remnants of degenerated cells. PAS stain after diastase digestion. Magnification $\times 640$.





5A Trophoblastic cell of basal plate showing fibrinoid inclusion and stalk, both surrounded by cell membrane. Term placenta from elective Caesarian section. Azan stain. Magnification $\times 1,500$

5B Collagen inclusion surrounded by cell membrane in a decidua cell of the basal plate of five months old placenta. Masson trichrome stain. Magnification $\times 1,500$.

Placentation in the Spotted Hyena (*Crocota crocuta* Erleben) With Particular Reference to the Circulation¹

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ABSTRACT A study of the placenta of the spotted hyena (*Crocota crocuta* Erleben) based on five specimens from early in the second third of pregnancy to full term, is presented. Resembling the dog and cat in the retention to term of large allantois and medium-sized yolk sac, the hyena is unique among Carnivora in the possession of hemochorial villous placenta, allied structurally more to that of New World monkeys than to the other carnivores. The intimacy of the fetal and maternal circulations is further increased by so-called intrasyntrophelial capillaries in the syncytial trophoblast. The hyena, unlike most carnivores, possesses no central hemisoma or marginal deposit of pigment, and lacks specialized structures in the chorionic membrane. The cytotrophoblast, however, does undergo modifications associated with phagocytosis of histotrophs in the paraplacental regions and in the junctional zone of the placenta proper.

The principal mode of entry of maternal blood is directly into the subchorial zone, into which uterine arteries, carried up in a crescent of gestational endometrial tissue at the margin of the placenta, empty. Smaller arteries reach the subchorial zone in maternal septa that traverse the entire trophoblastic zone. Major arteries do not discharge blood at the base of the placenta, but basal drainage constitutes the sole means of return of blood to the uterine veins. The phylogenetic significance of the morphogenesis and asculture of the placenta of *Crocota* is discussed.

Despite the common occurrence of the spotted hyena in the Old World tropics and the unrestricted hunting of the species permitted by the African authorities, a comprehensive account of the development and detailed structure of the placenta has hitherto been unavailable. The clinical description by Matthews ('39) of the reproductive tract of *Crocota crocuta* gives no information regarding placentation, and the more recent report by Morion ('37) is an account of the placenta and membranes based on a single, full-term specimen. The remaining information on this subject is confined to a brief note by Matthews ('54) and to the observations of Amoroso ('55, '59a, '59b, '60 '61) which stimulated the present investigation.

Interest in the placenta of the spotted hyena derives from two principal sources. Firstly the histological differences between the placentation of this genus and that of the carnivores in general present an interesting basis for reconsidering the phylogenetic significance of the features of placental structure to which Moessman

('37) drew attention. Secondly the intraplacental vascular relationships in *Crocota* represent a striking example of perfection in countercurrent flow the significance of which was first pointed out by Moessman ('26). In the present investigation, a morphogenetic approach is presented with particular emphasis placed on the maternal circulation and its relationship to that in man and the other Primates.

MATERIALS AND METHODS

The present study is based on the placentas and accessory organs of five hyenas ranging in gestational age from early in the second third of pregnancy to full term. In order of increasing age the specimens are designated S/1 W/2, G81/3 G100/4 and L/5 respectively. The most recent specimen hyena W/2, consists of the complete uterus and adnexa of an animal estimated as being in mid-pregnancy or about 55 days from term based on the average length of gestation of 110 days, as

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quoted by Matthews ('39) both the sterile cornu and the one containing the fetus were opened as was the abdomen of the fetus to allow more adequate penetration of the fixative, but relationships of fetus to placenta and membranes and of placenta to uterus remained intact. The specimen was received in good condition in 10% neutral formalin. The pregnant animal was shot in Kenya and the specimen flown to London through the courtesy of Dr. A. M. Harthoorn of the Faculty of Veterinary Science of the Royal College at Nairobi. The remaining four specimens were received in formalin from Tanganyika through the courtesy of Dr. L. Harrison. Matthews F. R. S. of the London Zoological Society. The specimen designated Hyena S/1 is estimated as early in the second third of pregnancy or about 45 days gestational age. It consisted of a uterus with intact placenta and membranes from which the fetus had been removed. Specimens G81/3 and G100/4 consisted of uteri containing intact placentas and membranes of animals estimated as 85 and 95 days pregnant, respectively. The fetuses had been removed prior to arrival in the laboratory. The largest specimen, Hyena L/5 consisted of a bisected uterus with term-sized fetus *situ*.

Observations and drawings of the gross anatomy were made prior to cutting the specimens. Slices through the five placentas and of the uteri of Hyena S/1 and W/2 and the uterine adnexa of W/2 were transferred to 70%, 90% and 100% ethanol. Membrane relationships were preserved by immersion in 1% celloidin hardening in 15% chloroform in ethanol, and clearing in cedarwood oil. The placental segments were embedded in paraffin and cut through in their entirety at either 5μ or 7μ . Most sections were stained with Harris hematoxylin and eosin; the remainder were stained with the periodic acid-Schiff reagent, Turnbull's or Prussian blue, or the Mallory Masson or Wilder reticulum method. Significant histological details, as revealed by light microscopy, were subjected to black and white color photomicrography. From specimen W/2 somewhat better preservation than others

thin sections were cut at 2μ , stained with Azure II and studied under oil. Thin sections of tissue from this animal were prepared for electron microscopy by embedding in araldite; certain sections were prepared from material than had been fixed in formalin alone; others were made from tissue that had been postfixed with osmic acid for two hours. All sections were treated with lead hydroxide.

OBSERVATIONS

Gross anatomy of the uterus and conceptus. Specimen S/1 consisted of an opened uterus containing a placenta with membranes in one horn, and an apparently nonpregnant horn. The fetus had been removed but a fold of allantois was found overlying the cavity. The yolk sac was readily identified between the amnion and the allantochorion. The placental band formed an incomplete annulus, measuring 16 cm in length, 5.3 cm in its greatest width and 0.8–1.2 cm in thickness.

Specimen G81/3 comprised an opened uterus with placenta and membranes intact within the pregnant horn. The placenta formed a bilobed incomplete annulus measuring 20.0 cm in total length. The lobes were almost equal in size measuring $9.5 \times 5.0 \times 1.0$ –1.2 cm and $10.5 \times 5.5 \times 1.0$ –1.2 cm respectively. The yolk sac was identified between allantois and amnion extending along the paraplacental chorion.

Specimen G100/4 consisted of a uterus with one pregnant and one nonpregnant cornu. The gravid horn contained a placental band comprising a trilobed incomplete annulus. The total length of the band was 21.5 cm and the average width 6.6 cm. The largest lobe measured $8.5 \times 7.0 \times 1.5$ cm and the smallest, $3.2 \times 5 \times 1.2$ cm. The intermediate lobe itself divided by a fairly deep central sulcus measured $4.2 \times 8.0 \times 1.4$ cm. A gap of 4.2 cm over which the endometrium was lined only by paraplacental chorion, separated the two ends of the placental annulus.

Specimen L/5 consisted of a bisected uterus containing a full-term fetus, attached by its umbilical cord to a trilobed central placental annulus. The largest lobe measured 11.0×10.0 , the smallest was 4.0 cm long and 5.5 cm in average width.

and the intermediate lobe measured 10.0 x 5.5 cm. Including a paraplacental gap of 11.0 cm, the total length of the annulus was 36.0 cm. The thickness of the placental band varied from 1.0-1.4 cm. In this placenta, as well as in the three previously described, each lobe received branches of both umbilical arteries and was drained by tributaries of both umbilical veins. The fetus of Hyena L/5 measured 250 mm from crown to rump. The umbilical cord was quite short, measuring only 5.0 cm in length.

Hyena W/2 (figs. 1 and 2) the most recent and complete specimen, consisted of a dorsoventrally flattened gravid uterus with its adnexa and a cuff of vagina. The two uterine cornua joined almost at right angles to form the short corpus uteri which was partially divided internally by a median longitudinal septum, the cornual lumina remaining separate almost to the cervixes. The ovaries were relatively smooth and white. A large corpus luteum on the left measured 2.0 cm in its greatest diameter doubling the size of the ovary hereby a smaller corpus luteum on the right measured 1.2 cm in largest diameter. The ovaries lay in bursae (fig. 5) the walls of which were well padded with fat, and in which natural slit-like openings 1 cm in length were found. The oviducts measured 12 cm in length, each consisting of a fibrillated extremity infundibulum, ampulla and isthmus.

Each uterine cornu had been opened, as did the abdomen of the fetus contained in the left side. The endometrium of the pre-pregnant right horn was deeply folded. Once the gestation sac on the left had been previously entered to facilitate preservation of the fetal tissues no observations of the amniotic or allantoic fluids were possible. The fetus (fig. 4) measured 152 mm CR, was attached by the 6 cm umbilical cord to the placenta. The fetus was a male with prominent phallus and 14 scrotal pouches (fig. 7). The vestiges of a yolk sac were identifiable between the per allantois and the amnion, which was encased both the yolk sac and the umbilical cord. A large vitelline vein traversed the fetal abdomen to end in the vicinity of the duodenal cap; the vitelline artery crossed the peritoneal cavity as a

firm white cord joining the left leaf of the mesentery of the small gut (fig. 3). The two umbilical arteries and the two veins ran relatively straight courses through the cord both arteries and both veins supplied and drained, respectively both lobes of the placenta. The mesoderm of the cord was fairly dense and vascularized by small vessels, more prominently in the central area. The placenta itself consisted of an incomplete bilobed annulus with a 5.0 cm gap bridged by the paraplacental chorion. The lobes were divided by a very deep cleft (fig. 1) each measuring 8.5 x 5.3 cm. Near the margin the depth of the placental mass was reduced to 0.6 cm whereas at its thickest portion it measured 1.6 cm (fig. 8).

In Hyena W/2 as in the other placenta the fetal surface appeared shiny and purplish-blue. No evidence of pigment deposits at the margin or of central or peripheral hematomata was found. The maternal surface was shaggy and yellowish-gray and presented the orifices of venous channels. Cross section of the placental lobe revealed the following areas grossly distinguishable: a thick but shiny allantochoion overlying a subchorial blood sinus; a dark-staining labyrinth, in which perpendicular striations could be seen; a clearly defined junctional and glandular zone in which some greenish pigment, fading rapidly after fixation, was found. Beneath the placental site the pale staining myometrium was found (fig. 8).

For purposes of description the placenta may be divided into four zones. Starting at the inner or fetal side, the first zone is that of the chorionic plate (actually the fused allantois and chorion) and the subchorial sinus. The inner surface of the chorionic plate is covered by cuboidal to columnar allantoic endoderm and its outer surface by syncytial trophoblast. The inner surface has occasional folds projecting into the allantoic cavity (fig. 34) and its outer surface, of course, bears the vascular chorio-allantoic projections or stem villi, which cross the area of the subchorial maternal blood sinus toward the labyrinth.

The second zone is the labyrinth proper or trophoblastic zone made up of the elaborately branched spongework of chorio-

allantoic villi, between which are the narrow intervillous maternal blood spaces continuous with the subchorial sinus and corresponding to the trophoblastic tubules of a labyrinthine placenta (figs. 18-22). Here fine strands of chorionic mesoderm covered by syncytial trophoblast are in direct contact with the maternal blood. The strands occasionally appear to fuse with others of similar size to form a labyrinthine arrangement, or frequently end freely as true villi particularly in the more advanced placentas, in which a greater number of capillaries appear indenting the trophoblastic covering in almost an intraepithelial fashion.

The third zone is the junctional region where attachment or penetration of the endometrium by the trophoblast occurs. Here tips of chorionic processes contact the endometrium by either their syncytial epithelium or by fronds of columnar cytotrophoblast (fig. 9). The maternal tissue in this zone consists of glandular debris blood and giant cells. A few remnants of dilated uterine glands are found in this basal area whence the placental blood drains into the subjacent uterine veins.

The narrow fourth or deep glandular zone contains the bases of endometrial glands separated by scant areolar tissue and attaches to the myometrium. The foregoing description, though applicable to the major portion of the placental mass fails to consider several specialized regions that differ significantly histologically and may be of importance functionally. Among these must be included the placental margin, the interlobular groove and the paraplacental chorion, all of which will be described subsequently.

The yolk sac and allantois. In common with other members of the Order Carnivora the hyena retains a large and permanent allantois, which even late in pregnancy can be recognized with its endodermal lining of cuboidal cells (fig. 10). The yolk sac on the other hand though still recognizable even at term becomes relatively smaller and less conspicuous as the placenta ages. A small sac derived from the vascular splanchnopleure is found collapsed and generally T-shaped. Each arm of the T has a somewhat bulbous tip by which it is attached to the

inside of the chorion. The thin walled structure is lined by deeply staining, tall columnar cells with vesiculated cytoplasm (fig. 13). As the conceptus ages, the prominence of the sac decreases and the lining epithelium becomes lower and less clearly vacuolated (fig. 11).

The amnion and umbilical cord. The amnion is surrounded by the allantois with which it fuses and by which it is vascularized. Although in other Carnivora amniogenesis occurs by folding, no information on this point is available for the hyena, of which the earliest stages have not been examined. The umbilical cord, even at term when it measures about 6 cm in length, contains two arteries and two veins as well as smaller vitelline vessels and the allantoic duct (fig. 12). The mesenchyme in the center of the cord is slightly denser than at the periphery but is not particularly well vascularized, a feature shared by most Carnivora except the wolverine, according to Wallock and Amoroso ('36).

Endometrium. Before describing the structure of the placental mass proper it is helpful to consider the changes in the endometrium of the nonpregnant corae and in that underlying the nonplacental and paraplacental areas of the gravid horn. The sterile horn exhibits the changes usually associated with pseudopregnancy in other animals, namely a glandular enlargement, with the individual glands separated by only thin strands of connective tissue (figs. 14 and 15). The glands narrow markedly at the base of the endometrium and follow a brief course therein. As pregnancy advances, the endometrium begins to degenerate resulting in the shedding at term of the entire glandular zone of the mucosa, except for the flattened bases of the glands, together with blood and debris into the uterine lumen.

An incidental observation concerns the ovules during pregnancy. Although none of the five ovaries in the present series contained more than one ovum, the case specimens in which the ovaries were available for study revealed two well developed corpora lutea, the one on the side of the pregnancy sometimes larger than that on the contralateral side. The ovarian stroma outside the corpus luteum showed a high degree of cellular hypertrophy and the number of follicles visible either to the naked eye or microscopically was very small (fig. 8). With regard to the hypertrophied and the rarity of follicles, the hyena every bears certain histological resemblance to that found in the so-called Stein-Leventhal syndrome in the human female.

Paraplacenta. In the paraplacental region, where a tongue-like extension of the allantochorion from the placental band remains in contact with the endometrium, in the manner of the smooth chorion in the human embryo the membrane is thrown into low folds that contact irregularities in the surface of the uterus. The epithelium of the chorion in this area is cuboidal and strips easily from the loose connective tissue that supports it. The chorionic epithelium, though lower than that of the cytotrophoblastic fronds of the placenta proper or of the marginal zone (fig. 36) shares the features associated with phagocytosis elsewhere including a vacuolated cytoplasm, in which granules and disintegrating erythrocytes can be found. The subjacent endometrium remote from the major placental mass shows changes similar to those in the subplacental endometrium (fig. 16) and in places the degenerative changes in the gestational endometrium are more striking than in the main placental area (fig. 17). Specializations in the chorionic membranes, such as the rosettes of large clear cells described by Amoroso ('52) in the dog, are absent in the sections studied.

Trophoblastic zone. The placenta proper is composed of strands of chorionic mesoderm, covered by syncytial trophoblast, that radiate obliquely outward from the chorionic plate toward the basal endometrium (fig. 30). In general, the fetal elements of the placenta comprise not so much a trabecular network forming a labyrinth of trophoblastic lamellae, as an essentially villous system (figs. 18-22) in which the greatly branched, slender villi are not entirely free, but exhibit occasional syncytial junctions. In certain areas in the earliest specimen, particularly in the subchorial and marginal regions areas of transition from the labyrinthine to the villous placenta can be observed (fig. 37) reaching in a condition rather like that described by Wialocki ('29) in the monkey. Even later in development, the interruption of tenuous syncytial connections between terminal chorionic strands converts the labyrinth in those areas to a villous state. Some of the main villous stems can be traced throughout the placenta to the basal plate (figs. 19 and 20) to which they

are attached by their syncytial coverings (fig. 48); others reach the depths of the intervillous space, but remain unattached with cytotrophoblast capping the villous tips that often occlude the mouths of uterine glands (fig. 49). The maternal blood throughout the placenta is in direct contact with the chorionic epithelium a true hemochorial relationship. In serial sections the course of the maternal blood within the labyrinth can be traced from the subchorial sinus (fig. 47) an extensive space lined by syncytiotrophoblast, whence it escapes through numerous ostia communicating with the underlying intervillous space. After leaving the subchorial sinus the blood pursues a circuitous course through the fetal portion of the placenta, eventually reaching the decidua to empty into the uterine veins but remaining at all times in contact with the trophoblastic lamellae or villi.

The allantoic vessels (fig. 30) supplying the placenta are large structures present at the apex of the radiating mesodermal cores. Repeated branching of the vessels within the axial mesenchyme of the chorionic processes results in a network of tortuous capillaries in the terminal villi. The drainage of the fetal capillary blood is back toward the chorionic plate in a direction opposite to that of the maternal capillary circulation, an excellent example of countercurrent flow.

Although the hemochorial condition is present at all stages of placental development in the present series as the placenta ages, the intimacy of the maternal and fetal circulations increases. The decrease in thickness of the histological barrier is effected by a reduction in the amount of connective tissue within the villi and by a proliferation of fetal capillaries in closer approximation to the trophoblastic lining (figs. 23-28). Furthermore as term is reached, the fetal capillaries approach the syncytial epithelium so intimately as to indent it and assume what has been described by Bonnet ('02) in the dog and Goldstein ('26) in the pig, and more recently by Amoroso ('52) and Wialocki and Amoroso ('56) in other species as an intraepithelial position (fig. 29). This reduces the anatomical barrier to the fetal capillary wall and a greatly attenuated

ing exception to his criteria for establishing interordinal relationships among the mammals.

The typical carnivore placenta, exemplified by the dog, develops by an essentially diffuse projection of short villi, vascularized by allantoic vessels, into the gland and crypt mouths of the endometrium. Most modern carnivore placentas resemble the postulated primitive ancestral type in the possession of an endotheliochorial labyrinth with retention of a permanent large allantois and a relatively large and persistent yolk sac. In its retention to term of a large allantoic vesicle and a medium-sized yolk sac, the hyena fulfills two of Vossman's major criteria for classification within the order Carnivora. With regard to the third ordinal criterion the orientation of the disc to the uterus which is antimesometrial or possibly irregular in other carnivores there is no information about the hyena, since earliest stages of placentation are not available for study. Vossman's fourth and fifth ordinal criteria concern the anatomy of the placental barrier which in other carnivora is endotheliochorial and labyrinthine but in the hyena is hemochorial and villous.

In features of lesser phylogenetic significance but of equal interest, the structure of the placenta of *Crocota* shows additional differences from other carnivores. Within the Order Carnivora, Amoroso ('52) has described a labyrinth that is regular and lobulated in the cat and irregular and nonlobulated in the seal. In the hyena, septa of maternal connective tissue divide the intervillous space, but neither well defined lobules nor a true labyrinth is present. A sequence among the Carnivora can be established based on the progressive reduction in thickness of the maternal capillary walls. In the wolverine (Wislocki and Amoroso '56) and other mustelids, the maternal capillaries are large sinusoidal vessels lined by prominent cuboidal epithelium and surrounded by a thick amorphous matrix, in such cases the term *vasochoial*, as suggested by Wislocki and Amoroso ('56) seems particularly applicable to the placental barrier. In the dog, cat and bear the maternal capillaries are lined by lower endothelial cells with less supporting matrix, a more

typical "endotheliochorial" relationship. In the hyena, however the maternal endothelium has entirely disappeared, creating a hemochorial condition. In *Crocota*, for thermore, the placenta, particularly at term is characterized by a multitude of intrasyntocytial capillaries. A series of carnivores has been described by Amoroso ('55) based on the prominence of capillaries in an apparently "intraepithelial" location. There is a gradation within the Order beginning with the timber wolf and ending with the grey Atlantic seal, in which there is maximal development of these capillaries. Amoroso ('55) has emphasized, furthermore the widespread occurrence of such capillaries in ungulates and lower animals.

Hematomata. Among the carnivores there is considerable variation in the size, number and distribution of hematomas and related structures. The hyena placenta is unusual, however in the complete absence of large central and smaller marginal hematomas such as characterize the wolverine, or of pigmented borders, such as those found in the cat (brown) and dog (green). The subchorial sinus of the hyena, moreover is not morphologically comparable to the hematomas of other carnivores since in *Crocota* the maternal blood space is lined on all sides by chorionic epithelium and originates as in man and rodents, basal to the endometrium. In the typical carnivore hematoma, the stagnant maternal blood lies between the uterine epithelium and the chorion, arising by extensive hemorrhage from the maternal vessels through the uterine epithelium. In the opinion of Amoroso ('52, '55) the typical carnivore hematoma is related more to structures such as the chorionic vesicle of the pig than to the true hemochorial condition.

The amount and location of extravasated maternal blood also differ among the carnivores. In the hyena, the early invasion of the trophoblast must outstrip the proliferative reaction of the uterus and so effect erosion of the maternal blood vessels over a wide area. The resulting diffuse lake in which maternal blood circulates is thus established differing from the stagnant hematomata of other carnivores.

In a very recent report, Biggers and Creed (62) describe the hematomas of the racoon as representing the hemochorial condition in a carnivore placenta. Again, the persistence of uterine glands and derivatives of maternal epithelial tissue indicates relationship to the condition in the dog and cat, rather than to that of the human placenta.

Endometrium. The hyena differs further from other carnivores in the greater destruction of maternal glandular elements beneath the placenta and the absence of a thick spongy glandular zone. Giant endometrial cells, lacking in most Carnivora except the cat in which they are present along the maternal vessels (Wlodek and Dempsey 46) are prominent at the base of the placenta in the hyena. Matthews (54) mentions a resemblance between the decidua giant cells of the hyena placenta and those of the cow. It is clear from the aforementioned observations that among the Carnivora there are significant differences in the mode and extent of reactivity of the maternal tissues to the invading trophoblast.

The labyrinth. The hemochorial condition, arising from extensive erosion of maternal vessels associated with suppression of maternal capillary growth, may develop along lines leading to either a labyrinthine or a villous state. The histologic resemblance in mid-pregnancy and at term of the placenta of *Crocuta* to that of certain platyrrhine monkeys, as described by Wlodek (29) Hill (32) Mossman (37) and Amoroso (52) suggests that the hyena too develops massive early trophoblastic proliferation. There thus results greater dependence on histotrophe in New World monkeys and the hyena than in carnivorine monkeys, apes and man, in which there is greater and earlier freedom of individual villi. By whatever means the hemochorial condition in the hyena develops, it is clear that for the most part the result is a villous placenta, rather than primarily a labyrinth as suggested by Morton (37). As Wlodek (29) demonstrated so clearly in the anthropoids and as has here been shown in *Crocuta*, transitions from the labyrinthine to the villous condi-

tion are common. Indeed, Stieve (41) believed that the placentas of all anthropoids, including man, were basically labyrinthine, consisting of intercommunicating networks formed by the fusion of chorionic lamellae, with fetal vessels running in uninterrupted fashion between the strands.

Cytotrophoblast. The specializations of the columnar trophoblast in the hyena placenta appear related to those areas of the chorion actively engaged in the absorption of histotrophe and extravasated blood. Amoroso (55) suggests analogies to the chorionic vesicles of *Loris* the irregular areolae of the sow the endometrial cups of the mare and the central and marginal hematomas of other carnivores. In man and monkeys further comparison with the cell columns, which consist almost entirely of cytotrophoblast, can be made. In those carnivores possessing an endothelochorial labyrinth, such as the dog and cat, the lamellae at the junctional zone are capped with cytotrophoblast (Druval, 1894 1895) resembling very closely the fetal epithelium of the junctional zone in the hemochorial hyena placenta. Cellular trophoblast of very similar appearance, though somewhat taller occurs in the conspicuous marginal fronds of the hyena, here the chorionic epithelium is slightly lower than that described by Druval in the hematoma area of the cat, but somewhat higher than that in the dog. The third location of phagocytic tall columnar trophoblast in the hyena is the lining of the interlobar sulci.

Columnar trophoblast of a similar but lower type, perhaps more accurately described as cuboidal, occurs in the paraplacental and non-placental areas in *Crocuta* and shares the features associated with phagocytosis. In these areas the underlying chorionic mesenchyme often appears more basophilic and more strongly positive for iron. In a general sense the placenta proper of the hyena, with its syncytial-lined intervillous space is adapted to hemotrophic functions, whereas the paraplacental areas, conspicuously lined by cytotrophoblast, are involved more closely in the absorption of histotrophe. The membranous chorion of the hyena though sharing with that of other carniv-

vores the ability to engulf particulate matter is unusual in its lack of specialized structures.

Vasculature In its main features, namely the entry of maternal blood into the fetal placenta through maternal septa and the exit of venous blood from its base the circulation in the placenta of the hyena appears at first to bear a resemblance to that of both the New World monkeys and the typical labyrinthine placenta of carnivores as described by Amoroso ('32) from which the hemochorial placenta of *Crocuta* may have been derived. Although in the single specimen of hyena placenta that he examined, Morton ('57) described an absence of maternal septa penetrating to the chorionic plate, in the present series such septa were consistently found furthermore they contained maternal arteries as described by Duval (1895) in the cat and dog (1894). In the hyena, however the principal arterial supply is at the margin, where the maternal vessel communicates directly with the subchorial sinus the smaller vessels in the maternal septa discharge their blood at or very near the top of the septum, thereby also communicating directly with the subchorial sinus. It is important to recognize that the arterial blood in *Crocuta* is not discharged at the basal plate into the intervillous space, as in the case of the macaque (Ramsey '56 '60).

The circulation in the placenta of the hyena is in several respects reminiscent of that postulated by Bumm (1893) for the human placenta, including high septal entry of arterial blood and diffuse basal venous drainage. In Bumm's scheme the placental arteries open high enough upon the septa to ensure insofar as the blood falling back toward the decidua bathes the functional villi, countercurrent flow of fetal and maternal blood. Though Ramsey ('56 '60) has clearly shown that the human placental circulation differs greatly from that described by Bumm the vascular relationships in the hyena placenta of the present series are remarkably similar to those in Bumm's human model. In this regard it is significant that in *Crocuta* no major or medium-sized placental arteries were observed to enter the base of the in-

tervillous space. What might be misinterpreted as arteries are large veins that drain the base of the labyrinth. A further semantic point of some significance arises with reference to the term subchorial lake, as proposed by Spanner ('35) in his theory of human placental circulation based on overflow filling. Unlike the subchorial "lake" of Spanner the subchorial sinus of the hyena receives arterial, rather than venous, blood.

As Ramsey ('60) points out, in both the labyrinthine and villous placentas of epitheliochorial syndesmochorial and endotheliochorial types the blood in the maternal and fetal vessels flows in opposite directions. Initial contact of the reduced fetal blood is thus made with maternal blood in the venous state and increasingly arterialized blood is gradually encountered. Since maximal passage across a permeable membrane occurs when flow is of the opposing variety the countercurrent distribution of maternal and fetal blood within the placenta allows for maximal efficiency. In the hemochorial villous placenta of *Crocuta* and man, the intervillous space is substituted for the closed system of maternal capillaries. In these terms, the placental circulation of the spotted hyena approaches perfection in countercurrent flow as a result of the complete septa that carry arterial blood directly to the subchorial sinus.

Reproduction. Although the atypical anatomy of the hyena's placenta might form a sufficient basis for considering *Crocuta* an extraordinary carnivore, other aspects of its reproduction are equally curious. The virtual absence of external sexual dimorphism in the adult hyena has, according to Matthews ('39) led to the widespread belief that the hyena is a hermaphrodite. Authors as widely separated by the ages as Aristotle (*Historia Animalium*) and Hemingway (*Green Hills of Africa*, '36) have described intersexual transformation in the hyena. Matthews explains this misconception on the basis of the large penis like clitoris and scrotal pouches of the female.

With regard to a phylogenetic scheme for the Mammalia based on comparative morphogenesis of the fetal membranes, the placenta of *Crocuta* has raised some

interesting problems. The structural specializations of the trophoblast, particularly the previously undescribed ultrastructure of the syncytium, have provided additional material for study. Definitive solution of both problems, however, must await acquisition of the earliest stages of placentation and tissue more suitably prepared for electron microscopy.

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PLATE 1

EXPLANATION OF FIGURES

- 1 Hyena W/2. Placenta in situ, showing deep sulcus separating lobes of the incomplete annulus.
- 2 Hyena W/2. Uterus with placenta in situ and attached fetus. The amnion is fused to the allantois, forming a thick, but shiny allanto-amnion.
- 3 Hyena W/2. The fetal abdominal wall is reflected to show vitelline stalk (V) traversing abdomen.
- 4 Hyenas L/5 and W/2. The larger fetus is at term (approximately 110 days). The smaller fetus (W/2) is from approximately the middle of gestation.

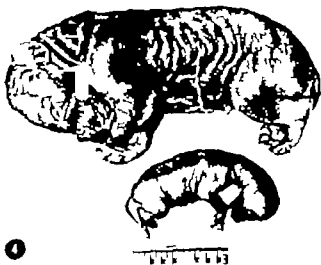


PLATE 2

EXPLANATION OF FIGURES

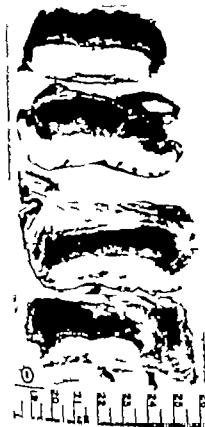
- 5 Hyen W/2. The uterus with placenta in situ and fetus removed. The corn join at approximately right angle to form the short corpus uteri. The cervix and both oviducts are shown. The ovary on the side of the nonpregnant horn is smooth and white, lying in bursa heavily peddled with fat.
- 6 Photomicrograph of ovary seen in figure 5. Follicles are relatively scarce in the superficial cortex. There is great cellular hypertrophy of the stroma. $\times 68$
- 7 External genitalia of male fetus of Hyena W/2. The prominent phallic protuberance and bifid scrotal pouches characterize both sexes at this stage of development.

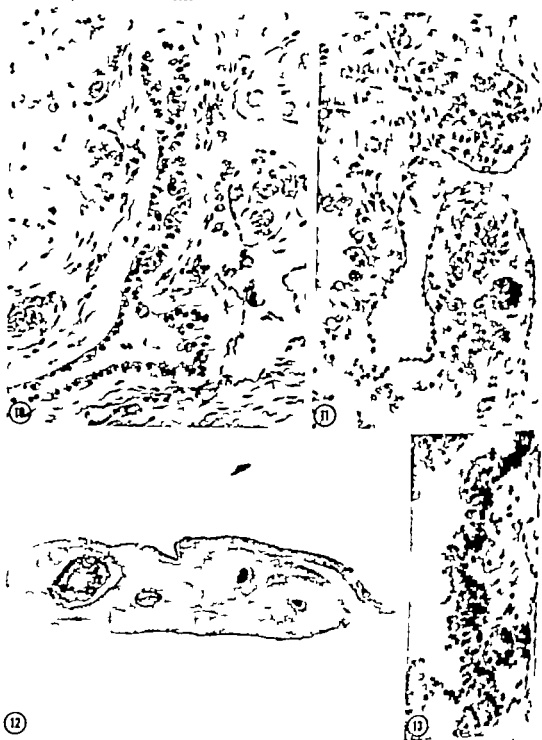


PLATE 3

EXPLANATION OF FIGURES

- 8 Cross sections of placenta (W/2) showing grossly distinguishable zones (1) fetal surface covered by allantochorion; (2) dark trophoblastic zone exhibiting perpendicular striations; (3 and 4) thin lighter junctional and glandular zones overlying the (5) pale myometrium.
- 9 Transect of placenta (S/1) showing bottom of trophoblastic zone and intervillous space (IVS) attachment of columnar trophoblast (C) junctional zone (J) and deep glandular zone (G) with underlying myometrium (M) Compare with figure 17 $\times 123$





- 10 Allantois of specimen G100/4 showing persistent membrane lined by cuboidal to columnar epithelium. $\times 221$
- 11 Yolk sac of G100/4 approximately 85 days gestational age. The endodermal lining is still intact. Compare with figure 13 $\times 221$
- 12 Umbilical cord of L/5 showing persistence to term of two umbilical arteries, two veins, and allantoic duct. $\times 9$
- 13 Yolk sac of earliest specimen (8/1) approximately 45 days gestational age. The endodermal lining is taller and the mesenchyme thicker than in figure 11 $\times 221$



- 14-15 Endometrium of nonpregnant horn of S/1. There is considerable glandular dilatation. An exudate appears in the uterine lumen $\times 44$
 16 Endometrium underlying nonplacental region of pregnant horn of S/1. The glands are even more widely dilated than in figures 14 and 15. $\times 44$
 17 Transformation of the endometrium underlying placental area of pregnant horn in S/1. The reaction of the maternal tissue in the deep glandular zone is comparable to that underlying the placenta seen in figure 9 153

PLATE 6

EXPLANATION OF FIGURES

- 18 Low power photomicrograph of placenta of S/1 showing chorionic plate () trophoblastic zone (t) functional zone (f) and thin deep glandular zone (g) overlying the myometrium (m). The general structure is less clearly villous than that of figures 19-22. Mason. $\times 18$
- 19 Trophoblastic zone of W/2, showing strands of branching chorionic mesoderm traversing the intervillous space. $\times 32$.
- 20 Hyena G81/3. The subchorial lake (ac) is prominent. Large chorionic-lentic strands attach by cytotrophoblast that caps their tips () The architecture is more villous than that in figure 18. $\times 16$.
- 21 Trophoblastic zone of G100/4 showing increasingly greater delicacy of fetal elements and architecture approaching that of the term placenta. Compare with figure 22. $\times 30$.
- 22 Term placenta of L/5. The lacy appearance in this section results from an almost complete transformation to the villous condition. Mallory $\times 13$

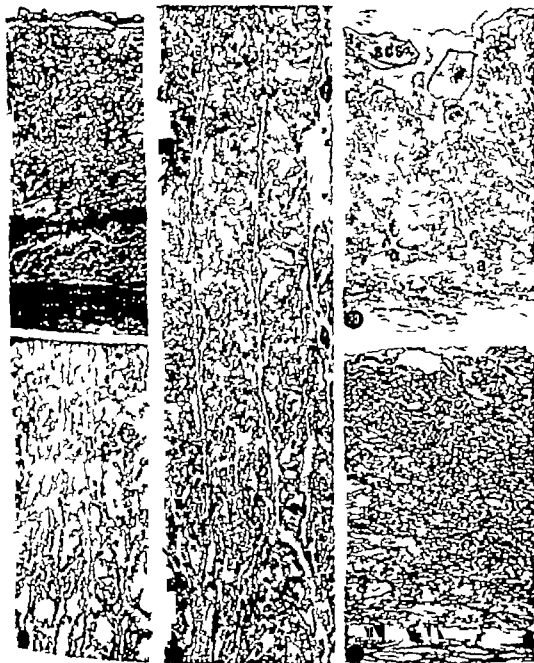


PLATE 7

EXPLANATION OF FIGURES

- 23 Villi of S/1 showing relatively thick and less well vascularized mesodermal cores than those in figures 24 and 25 $\times 152$.
- 24 Villi of G100/4 showing decrease in proportion of connective tissue and greater vascularity $\times 132$.
- 25 Villi of L/5 at term. The mesodermal cores are reduced to a minimum resulting in intimate approximation of fetal capillaries and maternal blood. Masson $\times 82$.
- 26 High power view of villi of S/1 (fig. 23) The cores are relatively dense and there is a suggestion of double layered trophoblast. Arrow points to cell of the Langhans type in the inner cytotrophoblast. Masson. $\times 573$.
- 27 Villus of G100/4 (fig. 24) An increase in vascularity and decrease in connective tissue are apparent, as compared with figure 26. Mallory $\times 502$.
- 28 Villi of L/5 at term (fig. 25) There is minimal connective tissue with fetal capillaries closely approximated to the syncytiotrophoblast. Mallory $\times 502$.

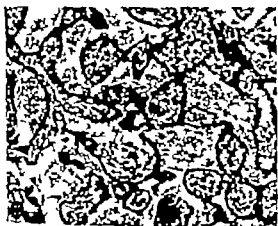


PLATE 8

EXPLANATION OF FIGURES

- 29 Villi at term (L/5) Arrow points to fetal capillary indenting the trophoblastic lining to assume an "intraepithelial" position. The placental barrier is here reduced to an attenuated syncytial epithelium and the fetal capillary wall. Mallory $\times 503$.
- 30 The trophoblastic zone of L/5 immediately beneath the allantochorion. A large allantoic vessel () appears in the chorionic mesoderm, from which exceedingly well vascularized villi radiate obliquely outward toward the decidua. Mallory $\times 96$.
- 31 Oil immersion photomicrograph of villus of W/2. The double layered trophoblast is readily seen at this magnification to consist of () columnar cells of the Langhans type and (s) syncytium. Within the core of the villus fetal capillary (f) is seen. The maternal side of the placental barrier is represented by (m) Laminæ within the syncytium are barely discernible. See figure 33. Thin section. Azura II. $\times 917$
- 32 Low power electron micrograph of villus of W/2. A syncytial nucleus is represented by () a fetal capillary by (f) and the intervillous space containing maternal erythrocytes by (m) The trophoblastic epithelial basement membrane is evident at the bottom of the picture. Millonig lead hydroxide. Formalin fixed. $\times 3,136$.
- 33 Electron micrograph of W/2 showing double layered trophoblastic epithelium. The darker nucleus () is syncytial; the smaller nucleus (c) is cytotrophoblastic, of the Langhans type. Microvilli () correspond to the "brush border" project from the outer surface of the syncytium. Structures resembling podocytes (p) project from the inner surface of the syncytium. Longitudinal lamellæ (l) course through the syncytial cytoplasm. Millonig lead hydroxide. Formalin fixed and poststained. $\times 9,856$.



PLATE 9

EXPLANATION OF FIGURES

- 34 The interlobular groove of the term placenta (L/5). The allanto-chorionic plate, in which large vessels run, covers both lobes. Masson. $\times 16$.
- 35 The chorionic epithelium in the region of the groove shown in figure 34. This tall cytotrophoblast is in contact with maternal blood and histiotrope. Masson. $\times 104$.
- 36 Para-placental chorion and endometrium of 8/1. The chorionic epithelium is cuboidal. There is an extensive reaction in the subjacent endometrium, with pyknosis of maternal epithelial cells and degeneration of endometrial cells to form ymplasma. Separation of chorionic epithelium from its mesenchyme is an artefact. $\times 131$.
- 37 Portion of trophoblastic zone adjacent to the subchorial sinus. The arrow indicates breakdown of a syncytial bridge converting the labyrinthine lamellae to villi. $\times 119$.



PLATE 10

EXPLANATION OF FIGURES

- 38 Placental margin of S/1. A crescent of gestational endometrial tissue is carried up from the base to the level of the subchorial sinus. Arrow indicates the transition from cyto- to syncytio-trophoblast. $\times 24$.
- 39 Higher power view of area indicated by arrow in figure 38. The columnar trophoblast (c) undergoes gradual transition to syncytio-trophoblast () $\times 73$.
- 40 Placental margin of G81/3. The placenta is deeply undercut by double layer of allantochoyon () extending deep into the angle of separation from the underlying endometrium () Unlike the situation in true circumvallation, the chorionic membrane is applied to both fetal and maternal surfaces. $\times 7$
- 41 Chorionic epithelium of the placental margin of W/2. The cytotrophoblast is in contact with disintegrating maternal blood (b) and histiotrophe (d) and resembles that lining the interlobular groove. Compare with figure 35. PAS. $\times 99$
- 42 High power view of cytotrophoblast at placental margin of L/3. The epithelium is very tall with delicately vacuolated cytoplasm and prominent nuclei and nucleoli. Mallory $\times 622$.



PLATE 11

EXPLANATION OF FIGURES

- 43 Giant decidual^u cells (g) in L/5 with clumps of nuclei of degenerating maternal epithelial elements (sy) $\times 504$
- 44 Endometrial cells with single and multiple nuclei surrounded by maternal blood in the junctional zone of L/5. The termination of the trophoblastic zone is seen above. Mallory $\times 35$.
- 45 Junctional zone of S/1 Both columnar () and syncytial () attachments to the basal endometrium are seen. Mallory $\times 35$.
- 46 A frond of cytotrophoblast contacts maternal blood and endometrium in L/5 Mallory $\times 292$.



PLATE 12

EXPLANATION OF FIGURES

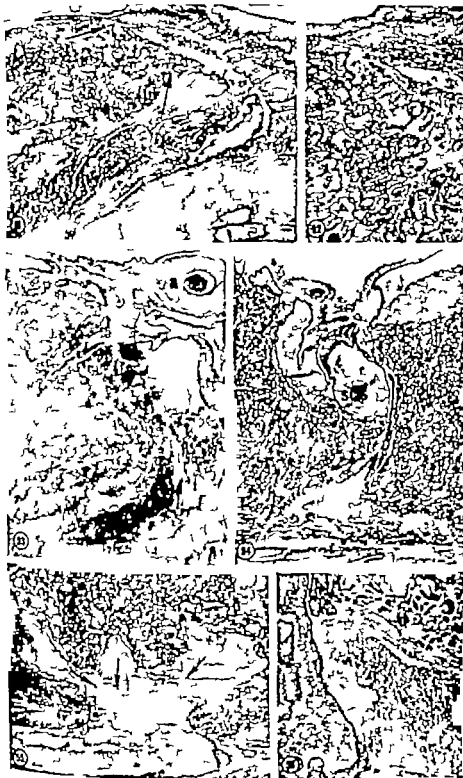
- 47 Hyena G81/3. Stout columns of chorionic mesoderm extend from the chorionic plate to the decidua. From the subchorial lake the circuitous course of the maternal blood can be followed without interruption throughout the trophoblastic zone to the basal plate. $\times 18$.
- 48 Base of trophoblastic zone in G81/3. The syncytial attachment to the decidua is seen. Compare with figure 49 $\times 104$.
- 49 In this area of G81/3 the terminal villi are capped by cellular trophoblast that attaches to the maternal tissue in the junctional zone. Compare with figure 48. $\times 104$.
- 50 High power view of the columnar trophoblastic attachment in the junctional zone of L/3. The cytotrophoblast here resembles that of the marginal and interlobular areas. Compare with figures 35, 41 and 42. Mallory $\times 292$.



PLATE 13

EXPLANATION OF FIGURES

- 51 Placental margin of 8/1. A large maternal artery courses through a crescent of decidua to empty directly into the subchorial sinus. The arterial wall ends abruptly at its junction with the sinus. The arrows indicate area of sinus shown under higher magnification in figure 52. PAS. $\times 14$
- 52 Area of subchorial sinus at placental margin indicated by arrows in figure 51. The syncytial lining of the sinus undergoes transition to the cytotrophoblast of the margin in the encircled area. PAS. $\times 29$
- 53 The marginal maternal artery surrounded by decidua^l tissue, in G81/3. The vessel is seen reaching the level of the subchorial sinus. Arrow indicates direction of blood flow. In serial sections, wide communications of the unbranched artery with the sinus are seen. A large allantoic vessel appears at () $\times 13$
- 54 A smaller maternal artery of G81/3, entering through a septum of maternal tissue, communicates directly with subchorial sinus (see). Arrow indicates direction of blood flow. Compares with figures 51 and 53 $\times 13$.
- 55 Venous drainage at base of placenta of G81/3. Maternal blood in the intervillous space escapes directly into three tributaries that form (see arrows) larger vein in the subplacental network. Masson. $\times 24$
- 56 Venous exit at base of placenta of G81/3. The maternal blood leaving in direction of arrows is in contact with trophoblast (t) and gestational endometrium (d) $\times 88$.



The Enzyme Histochemistry of the Osteoclasts of Normal and *la* Rats¹

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ABSTRACT Enzymes involved in oxidative metabolism as well as acid phosphatase are studied histochemically in osteoclasts from newborn normal rats and their littermates who suffered from generalized defect in bone resorption (the *la* rat). The osteoclasts of normal rats demonstrated intense activity for DPNH and TPNH diaphorase as well as succinic, malic and lactic dehydrogenase. Isocitric and glutamic dehydrogenase were less than one-half as active but no less definite. In the *la* rat the reaction for the diaphorases and dehydrogenases were exactly as observed in the normal. Acid phosphatase was observed in normal osteoclasts as general cytoplasmic reaction and also in band of concentrated activity at the junction of the cell and bone. The osteoclasts from *la* animals had greater acid phosphatase activity (more than twice as reactive) than the normal. However, the "junctional band" was only rarely observed in this anomaly. The junctional band may represent sites into which enzymes such as acid phosphatase are secreted in the resorption process and therefore only associated with active osteoclasts. It is possible that the *la* rat may successfully form but not secrete the enzyme.

Bone resorption is an integral part of the morphogenesis as well as the renewal of the osseous system and commences almost as soon as bone formation occurs. The osteoclast actively participates in the resorption process (Hancox and Boothroyd, '61) by dissolution of the bone crystal and organic matrix. The *la* (incisor absent) rat is a mutant strain characterized by severe impairment of physiological bone resorption (Bhaskar Weinmann Schour and Greep '50). An excessive amount of bone accumulates in spite of the presence of a large number of osteoclasts (Morse and Greep '60). The failure of the alveolar bone to resorb results in the ankylosis of the incisor and its absence from the oral cavity (Schour Bhaskar Greep and Weinmann, '49). The condition is apparently outgrown at about 30-60 days of age (Kenny Toepel and Schour '58 and Bhaskar Weinmann, Schour and Greep '50).

Walker ('81) was the first to evaluate dehydrogenase histochemistry of normal bone tissue. His results indicated a unique absence of isocitric dehydrogenase and TPNH diaphorase in the osteoclasts which were otherwise rich in citric acid cycle dehydrogenases. Walker then postulated

that citrate and lactate would accumulate and actively promote decalcification of bone and calcified cartilage. A similar proposal has been advanced by Neuman and Neuman ('58). Balogh Dudley and Cohen ('81) failed to substantiate the absence of isocitric dehydrogenase and TPNH diaphorase as reported by Walker but stated that glutamic dehydrogenase was absent.

Schajowicz and Cabrini ('58) have demonstrated acid phosphatase in normal osteoclasts and Burstone ('59a and '59b) has found this enzyme in these cells and also in bone matrix. DeDuve ('59) has associated this enzyme with several catabolic processes.

The aim of the present study was to re-evaluate the enzyme histochemistry of normal osteoclasts and investigate the same complement of enzymes of the osteoclasts of the *la* rat. By so doing, insight into the nature of the resorption failure in the *la* rat and more importantly the significance of various enzymes in the normal osteoclast processes might be achieved.

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METHODS AND MATERIALS

The *la* trait is transmitted as a simple Mendelian recessive factor (Greep '41).

la rats and normal littermates from our own colony were obtained in approximately equal numbers by breeding homozygous males with heterozygous females. Rats were sacrificed by decapitation at three days of age and the maxillary alveolar bones and tibiae were removed for study. At this age it is still possible to cut the bones and teeth without prior decalcification. All results reported were obtained on at least four different litters.

Oxidative enzymes. Tissue frozen in isopentane cooled by a dry ice-acetone mixture was cut in a cryostat at 6 μ and mounted on glass slides. For the demonstration of enzymes the following methods were used for succinic dehydrogenase that of Seligman and Rutenburg ('51) for diphosphopyridine nucleotide (DPN) linked dehydrogenases, malic, lactic and glutamic the method of Nachlas, Walker and Seligman ('58a) for reduced diphosphopyridine nucleotide (DPNH) diaphorase DPNH (0.5 mg/ml) was substituted as sole substrate in the aforementioned procedure for the triphosphopyridine nucleotide (TPN) linked isocitric dehydrogenase the method of Nachlas, Walker and Seligman ('58b) and for reduced triphosphopyridine nucleotide (TPNH) diaphorase TPNH (0.5 mg/ml) was substituted as substrate. In the demonstration of all the dehydrogenases and diaphorases tetranitroblue tetrazolium was substituted for nitroblue tetrazolium to minimize artifactual staining on lipid-aqueous interfaces (Sedar, Rosa and Tsou '62).

Control sections were incubated in the absence of the reduced coenzyme in the case of the diaphorases, and in the absence of the organic acid substrates in the case of the dehydrogenases. Unfixed sections were incubated in the various substrates for 30 or 60 minutes at room temperature and then post fixed in formalin and dehydrated and mounted in permount.

Acid phosphatase. The following adaptation of the Barka and Anderson ('62) azo dye procedure for acid phosphatase gave excellent results for bone from newborn animals. The tissue was prepared after

Holt ('59) using formal-calcium (neutralized to pH 7.0) for 32 hours at 4 C, followed by immersion in a solution of 0.88 M sucrose and 1% gum arabic at 4°C for two or more days. This last step restores much of the enzyme activity inhibited by fixation and aids in preservation of histological details. The gum-sucrose solution also made it possible to cut the fixed tissue in the cryostat. In some experiments tissue was decalcified in a solution of 10% versene (ethylenediaminetetraacetate) and 0.1 M tris (hydroxymethylaminomethane) which was adjusted to pH 6.95 (H. M. Fullmer personal communication). The decalcification followed the usual treatment with gum-sucrose and was performed at 4 C with constant agitation for three days the decalcifying solution being changed daily.

Sections cut in the cryostat at 6 μ were mounted on albuminized slides and dried for several hours. Slides were incubated at either 0 C or 25 C in a medium containing hexazonium pararosaniline and naphthol AS-TR as substrate (Barka and Anderson, '62). Control slides consisted of the following sections incubated without substrate (the naphthol AS-TR), sections incubated in the complete medium plus inhibitor (0.005 M sodium fluoride) and sections inactivated by heat (in distilled water at 80 C for 30 minutes) prior to incubation.

In all the experiments, livers and kidneys from adult rats were processed simultaneously for comparison.

RESULTS

Normal rat. The actively growing tibial epiphysis of the three day old normal rat contains osteoclasts predominantly in two zones: some are near the junction of the calcified cartilage and primary spongiosa (chondroclasts) and a greater number are found resorbing the distal ends of the trabeculae to accommodate the marrow cavity (fig. 1). Bone adjacent to the embryonic tooth contains osteoclasts actively remodeling the bone to provide for the expansion of the developing incisor tooth germ (fig. 4). Osteoclasts from these different anatomic locations showed similar oxidative ability in each of the various substrates.

Osteoclasts of normal animals demonstrated intense activity for DPNH and TPNH diaphorase as well as malic lactic and succinic dehydrogenase. In these cases, the diformazan stain reached maximum intensity by approximately 30 minutes of incubation at room temperature (figs. 1 and 4). Isocitric dehydrogenase (figs. 3 and 5) and glutamic dehydrogenase (fig. 6) were less than one half as active but no less definite than the more reactive dehydrogenases. Control sections incubated without substrate were negative. The osteoclasts were outstanding in their content of enzymes involved in oxidative metabolism when compared to that exhibited by the connective tissue cells and the other bone cells (osteoblasts being about one-half as active). The osteoclast generally equaled the liver parenchymal and the kidney tubular cells in its ability to oxidize the various substrates.

Acid phosphatase using the method of Burka and Anderson on tissue fixed in formal-calcium is visualized in the form of small cytoplasmic granules of the azo dye as well as a diffuse cytoplasmic stain. The reaction seen in the osteoclasts was rapid, maximum coloration without over staining being achieved by approximately 3 to 4 minutes at room temperature. It is interesting to note that under similar conditions liver and the tubules of the kidney did not achieve optimal staining until approximately 45 and 30 minutes respectively.

Because of the rapidity of the reaction in osteoclasts, bone was incubated at 0 C to time the reaction more carefully and these results will be described in detail. In the bones of normal rats, a band of concentrated acid phosphatase activity was often observed at the junction of the osteoclast and bone matrix (figs. 12 and 14). This band became obvious after 15 minutes incubation when the general cytoplasmic activity of the osteoclast was hardly apparent. The general cytoplasmic reaction was seen by 30 minutes incubation and the junctional staining became more intense. The observation of the junctional band was independent of the plane of sectioning. This band persisted when either whole tissue or sections were decalcified in verame. Osteoclasts were also

found lacking a junctional band of acid phosphatase but showing the generalized cytoplasmic reaction. Osteoclasts varied in the intensity of their reactions the normal osteoclasts of the secondary spongiosa in particular were more active than those of the primary spongiosa (fig. 7) and the osteoclasts resorbing the bone adjacent to the incisor (fig. 9) are less active than the osteoclasts found in the tibia.

After one hour incubation in the cold excessive staining occurred in the osteoclast. However the bone matrix was usually negative; infrequently a limited area of bone beyond the junctional band was stained (fig. 14). In contrast to this result in fixed tissue, bone matrix was almost totally stained when fresh tissue was cut in the cryostat and incubated without prior fixation. Fluoride in the substrate greatly inhibited the reaction and control sections treated with heat or incubated without substrate were negative.

The 1a rat. The tibia of the 1a rat shows little internal remodeling (Bhaskar Weinmann Schour and Greep '50). As a result, the trabeculae are thickened and the spongiosa displaces much of the marrow cavity (figs. 2 and 8). Osteoclasts are found on the surfaces of the trabeculae in great numbers throughout the extensive spongiosa and at times form a continuous layer of cells (fig. 13). In the maxilla the failure in resorption results in an accumulation of unresorbed alveolar bone which in turn causes the incisor tooth to remain small and become distorted in shape (Schour et al. 49). The dental epithelium is disrupted by spicules of unresorbed bone (figs. 5, 10 and 11). The osteoclasts are more numerous than in the normal animal and are found throughout the expanse of alveolar bone.

In the 1a rat the osteoclasts demonstrated positive reactions for the diaphorases and all the dehydrogenases tested. The activities of these enzymes were exactly the same as those observed in the normal littermates (figs. 2 and 5).

In contrast to the similarity in the oxidative enzymes, the acid phosphatase activity was greatly increased in 1a osteoclasts (figs. 8, 10, 11 and 13). Optimal staining occurred in the cytoplasm after 15 minutes of incubation at 0 C while at

least 30 minutes were required for the normal osteoclast. The reaction product also appeared to be more granular and to occupy a greater proportion of the cytoplasm in the *ia* rat. The concentrated activity at the junction between osteoclast and bone so common in normal bone was infrequently observed in *ia* bone (fig 13). The *ia* osteoclasts unlike their normal counterparts showed little variation in activity almost all cells manifesting an intense reaction. The bone matrix of *ia* rats was negative in properly fixed tissue. Acid phosphatase activity was entirely absent without the presence of naphthol AS-TR in the substrate and after pretreatment by heat. Fluoride added to the substrate greatly inhibited the reaction.

DISCUSSION

Biological oxidation-reduction reactions catalyzed by the dehydrogenases and diaphorases represent the major sources of energy in tissues. The osteoclasts whether of normal or *ia* rats were remarkable for their intense activity in the oxidative enzymes studied. The reactions were comparable to those of the surrounding muscle tissue and undoubtedly reflected the high energy requirements of osteoclasts. Baker and Klapper ('81) and Irving and Handelman ('84) found that other giant cells demonstrate high levels of oxidative enzymes.

Positive reactions were obtained for TPNH diaphorase isocitric dehydrogenase and glutamic dehydrogenase in the osteoclasts of both normal and *ia* rats. These enzymes have been reported as absent in normal osteoclasts (Walker '81 and Balogh Dudley and Cohen '61). Fullmer in a recent study ('64) has demonstrated that normal osteoclasts can exhibit maximal activity for the diaphorases and several dehydrogenases (including isocitric dehydrogenase) under appropriate conditions, and reasons that weak or negative reactions could be due to inadequate substrate concentrations. These results do not negate the theory of acid decalcification attributed to osteoclasts by Walker ('81) since it is not possible to draw any conclusions as to *in vivo* metabolic dynamics from a histochemical investigation. The methods are at best semi-qualitative and

the conditions of enzyme demonstration need not reflect the *in vivo* situation. The role of citrate as a decalcifying agent in bone resorption is still a matter of controversy.

De Duve ('59) associated acid phosphatase and other hydrolases with a special group of lytic particles which he called lysosomes. He identified such particles in the liver and kidney and suggested their possible involvement in intracellular digestion (phagocytosis, athrocytosis and pinocytosis) as well as autolysis and necrosis. Barka ('62) considered that acid phosphatase reactions stained structures associated with pinocytotic and reversed pinocytotic (secretion vacuoles) processes.

The osteoclasts proved to be unusually active with respect to acid phosphatase. Maximum coloring without overstaining was achieved about ten times more rapidly in osteoclasts than in liver or kidney tissue. A consistently higher enzyme content (at least twice as active) was found in the osteoclasts of the *ia* rat. Morse and Greep ('60) found the *ia* osteoclast to have more PAS-positive, diastase resistant granules than the normal cell, and it may be that the increased enzyme content is associated with these glycoprotein granules. Novikoff ('61 especially page 443) in his review of lysosomes and related particles states that PAS-positive material which is resistant to salivary digestion is associated with lysosomes. However lysosome-like particles have as yet not been demonstrated in ultrastructural studies of osteoclasts.

Previous techniques have demonstrated acid phosphatase in bone and dentine matrices (Burstone '59a and '59b). Gomori ('56) states that acid phosphatase is quite soluble in unfixed cryostat sections and even to some extent in formalin fixed frozen sections. Holt ('59) has suggested preparing the tissue using cold formal-calcium followed by treatment with cold hypertonic sucrose containing gum acacia, since he considers this procedure maintains the phospholipid membranes surrounding the enzyme and fixes the enzyme *in situ*. Using this technique, bone matrix is found to be almost devoid of acid phosphatase activity. Occasionally the matrix just beyond the junction with the normal osteo-

did stain. However such extracellular localization must be interpreted with caution.

The band of concentrated acid phosphatase activity observed at the junction of the normal osteoclast and bone matrix may well be functionally significant. Since this band manifests itself before the general cytoplasmic reaction becomes apparent it is unlikely to be a site of nonspecific absorption of soluble reaction products or of the final dye. Decalcification of the tissue does not interfere with the demonstration. The presence of many normal and almost all *la* osteoclasts exhibiting the general cytoplasmic reaction but not the junctional reaction also argues against a nonspecific artifactual absorption of enzyme or reaction products in the junctional zone. Indeed, this band may represent sites into which enzymes are secreted in the resorption process and are therefore only apparent when associated with active osteoclasts. This hypothesis is supported by the observation that osteoclasts from the *la* rat, which have a partial bone resorption failure, only rarely demonstrate the junctional band of activity. An alternate explanation is that bone undergoing osteoclasts is so altered that soluble dye is preferentially absorbed.

Henoux and Boothroyd ('61) have examined sites of osteoclasts with the electron microscope. They described a narrow zone of altered bone, an extracellular junctional zone and a ruffled border of innumerable cytoplasmic processes. The precise localization of the acid phosphatase of the junctional band awaits ultrastructural examination. However localization of enzyme on bone matrix beyond the surface of altered bone is unlikely because of the limited diffusion in bone (Neuman, Mulryan and Martin, '60).

Burstone ('59) has described an acid phosphatase reaction in the bone matrix adjacent to osteoclasts. The junctional band described in this paper need not be comparable to Burstone's observations since the band is narrower and does not appear to be on the bone matrix. This zone also is more reactive than the general cytoplasm of the osteoclast.

Greulich ('61) has reported a "ring" of increased radio-density between active os-

teoclasts and bone in microradiograms of decalcified bone. He tentatively concludes that this ring represents a focal accumulation of proteinaceous material possibly in part enzymes concerned with bone destruction. He notes that there has been no demonstration of concentrated enzyme activity in this junctional zone. The observation of acid phosphatase in a band of similar size and location to Greulich's radio-dense ring lends credence to the idea that lytic enzymes accumulate at the junction between active osteoclasts and bone.

A number of investigations have been carried out in an attempt to determine the cause of the failure of bone resorption in the *la* animals. This does not appear to lie in the bone matrix, since bone from an *la* rat transplanted into a normal animal is remodeled in a normal way (Gillette, Mardfin and Schour '56) and such bone will resorb in tissue culture (Goldhaber personal communication). The extracellular environment of the cell appears in many ways normal. Kenney, Topel and Schour ('58) have found that the calcium and phosphorus metabolism of *la* animals suggested normal endogenous parathyroid function.

Since large doses of parathyroid extract given at an early age improve the dental anomaly and bone formation (Bhaskar, Schour, Greep and Weinmann, '52) it has been suggested that the osteoclasts are unresponsive to parathyroid hormone at normal levels (Gillette, Mardfin and Schour '56). Another finding which suggests that the defect lies in bone cells has been reported by Vaes and Nichols ('63). They found in an *in vitro* study with bone slices that the *la* abnormality was associated with a partial block in the oxidation of citrate to keto-glutamic acid, and that the *la* bone maintained unusually high steady-state calcium concentrations. It is impossible with such a technique to identify the cells responsible for these findings. Bone from an *la* animal is anatomically different from normal bone and this also makes biochemical studies difficult to interpret.

One significant difference in the present findings in the *la* osteoclasts compared with those from normal animals is a higher content of acid phosphatase which can be

correlated with the histochemical findings of Morse and Greep ('60) already referred to. Also the osteoclasts of *la* rats contained a consistently high concentration of this enzyme while the normal was variable in activity. Another significant difference in the *la* rat is the infrequency of the band of concentrated acid phosphatase at the junctional zone. It is conceivable that *la* osteoclasts can form but not secrete this enzyme which seems to be closely associated with catabolism. Agents such as parathyroid hormone which normally activate osteoclasts may be needed in higher amounts for the activation of this mechanism. The microenvironment of the *la* bone can successfully initiate differentiation of osteoclasts from what Young ('63) calls the osteoprogenitor pool. However some factor is missing which carries these cells into full function.

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PLATE 1

EXPLANATION OF FIGURES

Figures 1 through 6. Oxidative enzymes in newborn normal and "le" rat bones. All reactions performed at room temperature using the tetrazolium salt TNBT. No counterstain was used.

- 1 Normal tibia incubated 30 minutes for DPNH diaphorase. The epiphyseal cartilage (C) is at the top and the marrow cavity (M) at the bottom. Osteoclasts are exceedingly reactive and can be seen in the region of the calcified cartilage (top arrows) and about the distal ends of the trabeculae (bottom arrows). $\times 100$
- 2 "Le" rat tibia incubated 30 minutes for DPNH diaphorase. A comparable section to figure 1 with the epiphyseal cartilage (C) at the top. The osteoclasts (arrows) are increased in number but they are equally reactive. The trabeculae show little remodeling and obliterate the marrow cavity. $\times 100$
- 3 Normal tibia incubated 60 minutes for isocitric dehydrogenase. The typical enzyme reaction is seen in the multinucleated osteoclasts (arrows) clustered about the distal ends of the trabeculae. $\times 250$.
- 4 Normal maxilla incubated 30 minutes for TPNH diaphorase. The incisor tooth is at the top (A = ameloblasts; S.L. = stratum intermedium). Three osteoclasts (arrows) at edge of the labial alveolar bone (B) show the typical enzyme reaction. $\times 250$.
- 5 "Le" rat maxilla reacted 60 minutes for isocitric dehydrogenase. The dental epithelium is interrupted and distorted (top arrow) by spicules of bone. Osteoclasts are seen (bottom arrows) surrounding these spicules. Osteoclasts are also seen at the edge of the labial alveolar bone (B) which in this section has been torn away. The activity in these "le" osteoclasts is comparable to the normal (fig 3). $\times 250$.
- 6 Normal osteoclasts from the maxillary alveolar bone adjacent to the expanding first molar. This section was incubated 60 minutes for glutamic dehydrogenase. $\times 400$.

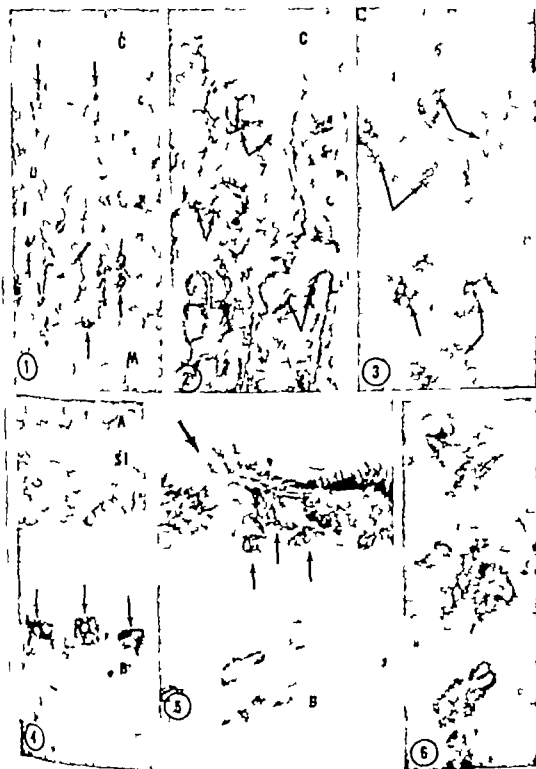


PLATE 2

EXPLANATION OF FIGURES

Note Figures 7 through 11 demonstrate acid phosphatase in newborn normal and *la* rat bones. Tissue was fixed in cold formal-calcium followed by cold gum-sucrose solution. Sections were incubated in medium containing n phtbol AS-TR and hexazonium pararosaniline at 0 C

- 7 Normal tibia incubated 60 minutes for acid phosphatase. The epiphyseal cartilage (C) is at the top and the marrow cavity (M) is at the bottom. A moderate reaction is seen in osteoclasts near the calcified cartilage (top arrows) and more intense reaction is noted in osteoclasts at the distal ends of the trabeculae (bottom arrows). Note the zone of concentrated activity at the junction between the bone matrix and the cell. The matrix is negative. No counterstain. $\times 100$
- 8 *la* rat tibia incubated 60 minutes for acid phosphatase. A comparable section to figure 7 with the epiphyseal cartilage (C) at the top. The osteoclasts are more intensely reactive than the normal. The bone matrix is negative. The trabeculae are unresorbed and obliterate the marrow cavity despite the presence of great number of osteoclasts. N counterstain. $\times 100$.
- 9 Normal maxilla incubated 60 minutes for acid phosphatase. A weak reaction is noted in the osteoclasts (arrows) along the edge of the labial alveolar bone (B). Note the orderly arrangement of the dental organ (A, ameloblasts and O odontoblasts). Counterstain hematoxylin. $\times 110$
- 10 *la* maxilla incubated 30 minutes for acid phosphatase. An intense activity is noted in the osteoclasts (arrows). Compare with the less reactive osteoclasts seen in the normal (fig 9). The alveolar bone (B) impinges upon the base of the developing incisor. This results in folding and disruption of the dental epithelium (DE) in several places. Counterstain hematoxylin. $\times 110$.
- 11 *7* maxilla incubated 30 minutes for acid phosphatase. Note the intense enzymatic reaction in the osteoclasts (arrows) which surround spicule of bone (B) that interrupts the continuity of the dental epithelium (DE). Counterstain hematoxylin. $\times 250$



PLATE 3

EXPLANATION OF FIGURES

Note Figures 12 through 14 demonstrate acid phosphatase in newborn normal and 4w rat bones. Tissue was fixed in cold formal-calcium followed by a cold gum-sucrose solution. Sections were incubated in a medium containing naphthol AS-TR and hexazonium pararosaniline at 0 C.

- 12 Normal tibia incubated 30 minutes for acid phosphatase. Osteoclasts (arrows) are found at the distal ends of the bony trabeculae (B). Note the concentration of enzyme in the "junctional band", as well as the less intense cytoplasmic reaction. The bone matrix is negative. N counterstain. $\times 250$
- 13 4w tibia incubated 15 minutes for acid phosphatase. Despite the shorter incubation period, the osteoclasts (arrows) are more reactive than those of the normal. Much of the reaction product is granular in nature. Note in these osteoclasts the absence of the "junctional band" of concentrated activity which is observed in the normal (fig. 12). The bone is negative. No counterstain. $\times 250$
- 14 Normal tibia incubated 45 minutes for acid phosphatase. A series of osteoclasts are seen in Howship's lacunae. Note the junctional band of activity (arrows) as well as the cytoplasmic reaction. This junctional zone may parallel the striated border of the osteoclast. However some bone matrix activity is noted beyond this zone (right arrow). Counterstain hematoxylin. $\times 500$.



An Electron Microscopic Study of the Cementum Sharpey's Fibers and Periodontal Ligament in the Rat Incisor ^{1,2}

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ABSTRACT The rat incisor is continuously erupting, so-called rootless, tooth. It differs from human or similar "rooted" teeth in that its generative cells persist at the base of the tooth. These cells are derived from the invagination of oral epithelium which forms the dental lamina and the developing dental organ. This epithelium becomes vase-shaped structure surrounding condensation of connective tissue elements called the dental papilla. The cells on the labial aspect of the epithelial dental organ specialize to form enamel. The cells on the lateral and lingual aspects remain undifferentiated and are called Hertwig's epithelial sheath. The odontoblasts are derived from the dental papilla. The hard tissues of the tooth form continuously at the base, and the tooth erupts into the oral cavity where the incisal edge is worn by abrasive action during gnawing (Brunn 1887; Addison and Appleton '15; Schour and Mamer 42).

Hertwig's sheath extends from the base of the tooth to a short distance beyond the point where dentin formation commences. At this level the epithelial cells separate and the sheath disintegrates. As these cells separate, cementoblasts and collagen fibers appear adjacent to the newly forming dentinal surface. Apatite crystals are deposited in the matrix of collagen fibers and this layer of cementum results (Selvig, '73). Since Hertwig's sheath is persistent at the base of the tooth, this initial phase of cementogenesis is continuous.

In rooted teeth, on the other hand, initial cementogenesis is completed when the root becomes fully formed, and Hertwig's sheath has been expended. There may be subsequent progressing depositions of cementum to form one or several strata. This initial stratum is called "primary cementum" and the successive layers are called secondary cementum. Primary cementum contains fine fibrils arranged radially (fiber cementum). Secondary cementum generally contains cells (osteocementum) but it may be acellular. Regardless of category cementum contains matrix (intrinsic) fibers, and also, in most cases, Sharpey's (extrinsic) fibers (Lahner and Plenk, '36; Eick, '46; Heid, '51; Schmid, '51; Sacher '62).

During the course of eruption of the rat incisor the periodontal fibers which are attached to the cementum move with the tooth until they somehow undergo dissolution prior to the entry of the tooth into the oral cavity. A similar picture is obtained during the more limited period of eruption of rooted teeth. The mechanisms of formation, reorganization and dissolution of the periodontal fibers are all matters of biologic importance. Moreover investigations of these phenomena may have some bearing upon understanding those pathologic processes which involve the detachment of the gingiva from teeth and the exfoliation of teeth from their sockets.

Mammalian teeth are attached to their sockets by the periodontal ligament. This ligament contains connective tissue fibers occurring between the cementum and the alveolar bone. Such fibers also extend from the cementum to the lamina propria of the gingiva, securing the gingiva to the tooth. The embedded ends of the periodontal fibers are referred to as Sharpey's fibers.

Adaptation to changes in tooth position incident to growth, eruption, and to function is accomplished by the remodeling of

alveolar bone the reorganization of the periodontal fibers and by the apposition of cementum. Cementum is not remodeled, as is bone by an interplay of resorptive and appositional phenomena. While cementum resorption may occur apposition

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is the predominant mechanism for the alteration of cementum. The deposition of cementum therefore results in a gradual increase in its width and a concomitant increase in the length of Sharpey's fibers.

In recent years electron microscopy has been employed in the examination of cementum. The earliest electron micrographs of cementum were obtained from replicated preparations of human cementum (Gerould, '44; Matsumiya and Takuma, '54; Takuma, '56; Awazawa, '61; '63). These micrographs demonstrate the irregular disposition of the fibrillar matrix of the cementum and the perpendicular arrangement of Sharpey's fibers.

Thin sections of decalcified cementum (Thillander '61; Stern, '62; Selvig, '63) and undecalcified cementum (Frank and Nalbandian '63; Selvig, '63; Albright and Flanagan '62) provide micrographs of greater clarity than the replicated preparations and are more informative. Frank and Nalbandian ('63) and Selvig ('63) have examined the early development of cementum in humans and in mouse incisors. Thillander ('61) has been concerned with periodontal disease in the rat molar. Albright and Flanagan ('62) have reported on calcification of newly formed cementum in teeth from adult hamsters and humans.

The present study provides a description of the ultrastructure of rat cementum just prior to its eruption. The periodontal fibers and the cementoblasts were also studied to gain a further insight into the relationship between the cementum and the periodontal ligament in this continuously erupting tooth.

MATERIALS AND METHODS

Specimens were obtained under Nembutal anesthesia from 14 white rats older than 55 days weighing 225 to 300 gm. The mucosa below the gingiva was reflected and portions of the incisors with bone and gingiva in place were obtained by cutting through the hard tissue with high speed dental apparatus under coolant. The erupted portion of the tooth was then trimmed away. The specimens were fixed for two hours in ice cold 2 or 4% osmium tetroxide buffered to pH 7.4 (approx.) with *s*-collidine (Bennett and Luft '39).

The tissue was washed in distilled water and then decalcified from 7 to 17 days in 5% formalin and 0.25 molar EDTA at pH 8.0. The tissue was washed again and then dehydrated in increasing concentrations of ethanol and embedded in Epon (Luft, '61). The specimens were mounted on aluminum specimen holders with epoxy cement and oriented so that the dentinocemental junction was perpendicular to the block face. Sectioning was done with a Porter-Blum ultramicrotome and glass knives. Sections 1 to 2 μ in thickness were mounted on glass slides and stained with aqueous toluidine blue. These sections were then examined with the light microscope to judge whether the specimens were properly oriented and to assure that the cementum would be included in the trimmed block face. At the same time the quality of the preparation was inspected and specimens which exhibited undue signs of damage were discarded (5 animals in all). The acceptable specimens were sectioned for electron microscopic examination. Sections were picked up on grids coated with a thin carbon film and stained with uranyl acetate (Watson, '58) or lead tartrate (Allmonig, '61). Microscopy was performed with RCA 2C and 4A electron microscopes equipped with a rectified stabilized power supply.

LIGHT MICROSCOPIC OBSERVATIONS

The rat incisor is an arc-shaped tooth which is roughly triangular in cross section (figs. 1-2). The bulk of the tooth consists of dentin which is coated on its anterior (labial) surface with enamel and on its posterior (lingual) and lateral surfaces with cementum (figs. 1-2). Unlike the rat molar or human teeth in which the cements enamel junction runs the tooth in a horizontal plane the rat incisor has two cements enamel junctions which course the length of the tooth as the lateral borders of a single stratum of acellular cementum (fig. 1). The inner surface of this layer (the dentinocemental junction) is smooth and relatively regular (figs. 3, 4) while the outer surface is more irregular because of the extending fibers (fig. 3) and small protruding tubercles may be evident (fig. 4). This layer of cementum attains a thickness of 1 μ to 2 μ prior to eruption.

Fiber bundles course from the surface of the cementum around the cells and of the periodontal ligament to the alveolar bone (fig. 5) or to the gingival epithelium (fig. 8). The cellular elements tend to be oriented and compressed between the fiber bundles (figs. 3-5). At times the fiber bundles course directly to the bone, and at other times, they are interrupted in the middle of the ligament by loosely organized fiber bundles which seem to run parallel to the tooth surface. The cells have a variety of shapes: ovoid, spindle, or occasionally stellate, and the nuclei are ovoid or elongated and contain one or more prominent nucleoli (figs. 3-4). The ligament also contains numerous capillaries and nerve fibers lying between the fiber bundles.

ELECTRON MICROSCOPIC OBSERVATIONS

Cellular structure

The cells adjacent to the cementum (figs. 7-8) are plump, ovoid or slightly elongated cells and have numerous cytoplasmic extensions. Their nuclei are generally ovoid and regular in outline and contain one or more prominent nucleoli.

These cells are separated from the cementum by a zone of collagen fibrils one quarter micron to several microns in width. This zone does not appear to be cementoid (semibonded cementum matrix). The cytoplasmic processes only occasionally come into contact with the cementum (fig. 14).

The cytoplasm of the cementoblasts contains an abundance of rough surfaced endoplasmic reticulum. The cisternae of the endoplasmic reticulum are dilated and appear to contain a flocculent, or slightly granular or filamentous material. The cisternae communicate with each other and with the nuclear envelope (fig. 10). The membranous components of the endoplasmic reticulum are not very obvious, possibly having been rendered pale by the preparatory procedure. When cut *en face* groups of ribosomes are seen to be arranged in delicate, closely juxtaposed, parallel arrays (fig. 11).

Cells farther away from the cementum have similar appearance, but the long,

spindle-shaped form occurs with greater frequency. The preparatory procedure which involves chelation and post-fixation for a rather prolonged time leads to the formation of several typical artifacts. Cytoplasmic membranes may become less distinct (figs. 8-10-13). The nuclear margin appears to become more prominent (figs. 7-8-10). On the other hand, the ribosomes and the collagen fibrils are unchanged in appearance. The endoplasmic reticulum is indicated by the linear array of ribosomes. The plasma membrane may be evident (figs. 12, 13) but is often indicated by a narrow pale zone separating the cytoplasm from the collagen fibrils (fig. 10).

Periodontal ligament

The periodontal fibers extend from the cemental surface and in a wavy course pass around the cells and their processes (figs. 7-8). The fibers range from approximately $\frac{1}{2}$ μ to 5 μ in width. Each periodontal fiber consists of a bundle of submicroscopic fibrils. The periodicity of the fibrils ranges from 500 Å to 600 Å, and their diameters range from 300 Å to 400 Å. Very fine fibrils which are less than 100 Å in diameter and which have no apparent periodicity are also noted (figs. 10-11). Each collagen fibril is distinct and separate from adjacent fibrils.

The fibrils within a bundle are rather uniformly spaced and despite their wavy course tend to be parallel. While it is possible to follow a single fibril for several microns, it ultimately passes out of the plane of section and other fibrils enter the plane. Fibrils may cross each other in different planes and produce a palisade-like arrangement (figs. 7-8).

As they insert into the cementum the periodontal fibrils are arranged perpendicular to the surface (figs. 7-8-9-15). Even when they run parallel or tangential to the cemental surface (fig. 18) they turn, before inserting and enter the cementum in an approximately perpendicular position (figs. 14-18). Other angles of insertion are infrequent. When they do occur cellular elements are found positioned in close relationship to the inserting fibrils (figs. 8, 14).

Cementum

After decalcification, the cementum has a stippled or finely reticulated appearance. It is about as dense as the adjacent dentin from which it is separated by a slightly irregular opaque line the dentinocemental junction (figs. 7-9). Collagen fibrils within the dentin may be observed running parallel to the dentinocemental junction (figs. 8 9 14 20) and similarly disposed collagen fibrils may be observed within the cementum (fig. 9). In some instances the junction has an irregular appearance however the dentin and cementum are clearly delineated (fig. 20). There is never any indication of a space between the two tissues and the collagen fibrils do not cross the dentinocemental junction. On occasion, however a discontinuous dense line may be seen in the cementum adjacent to the dentinocemental junction, and separated from it by a narrow less dense zone (fig. 22).

The cemental surface appears as a line as dense as the dentinocemental junction (fig. 8) and is studded with projections of varying size (figs. 8 9 14 15). These projections are roughly conical in shape ranging from 0.6μ to 2.0μ in diameter and from 0.3μ to 1.0μ in height. The small conical projections (figs. 8 14 15) are associated with individual periodontal fibrils. Where a number of fibrils enter the cementum as a bundle a larger projection may be found (figs. 9 17). Densities which are evident in cross-section (figs. 8 16) and in longitudinal sections of these projections may exhibit periodicity.

The fibrils which are embedded in the cementum may have characteristic collagen banding, although this banding may be difficult to perceive (figs. 15 18). They may be traced inward for a variable distance from the cemental surface. Near the surface they tend to be parallel and to continue in the orientation of their insertion (figs. 7 9 14 18). As they are traced deeper into the cementum they turn and may have a more diagonal and divergent orientation (figs. 8 17 18 20). At times the fibrils appear to end in the vicinity of a discontinuous, somewhat diffuse zone of density which may be evident near the center of the cementum (figs. 21 22).

It has already been noted that the deeplying intrinsic fibrils course parallel to the dentinocemental junction (fig. 9). Frequently irregularly arranged thin dense lines are found in the position usually occupied by the intrinsic fibrils (fig. 19). These densities may also have a more diagonal and parallel arrangement (fig. 20). When the plane of section is fortunate, a continuity can be demonstrated between the dense lines and the periodontal fibrils (figs. 14 20).

DISCUSSION

Use of decalcified material

Fully calcified tissues are difficult to section. Moreover the apatite crystals tend to obscure the collagen and ground substance. Sectioning across hard and soft tissue junctions presents the additional problem of tearing or pulling at the interface during sectioning. This problem can be overcome by persistence, or by examining embryonic tissues in the early stages of calcification, or by the use of decalcified preparations.

Decalcification has been utilized in many electron microscopic studies and may be obtained through the action of acids (Scott '52; Albright et al., '52; Bernick et al., '52; Shroff et al., '54; Takuma et al., '56; Frank '57; Takuma, '60; Johansen and Parks, El. Selvig, '63). Others have employed chelation with EDTA (Robinson and Wamer '52; '55; Takuma et al., '56; Frank, '57; Lenz, '58; Arwill, '58; '60; Yaeger '61; Thilander '61; Mjor '62; Shroff '62; Stern '62; Kneese and v. Harnack, '62). It is also possible to section calcified tissues and then decalcify the sections on the grids with potassium permanganate, uranyl acetate or phosphotungstic acid, all of which produce some degree of demineralization (Dudley and Spiro, '61), or with acids or EDTA (Yaeger '61).

Examination of EDTA decalcified preparations indicate that chelation leads to changes. These changes are produced to varying degree in different preparations so that inspection must be employed as a means of eliminating the more extensively altered material.

The alteration of the density of the cytoplasmic membranes as observed in this

study is of interest. When formalin fixed bone is chelated with 0.125 molar EDTA at pH 7.4 for ten days there is no significant alteration in the nitrogen content of the solution (Cook and Ezra-Cohen, '62). One might presume, therefore, that the paling of membranes observed in this study was not produced by a hydrolysis of the protein by the EDTA, although the more alkaline pH (8.0) may have played some such role. On the other hand Klein and Ginzberg ('60) produced a loosening of plant cell walls by immersion of the tissue in 0.1 molar EDTA prior to fixation. They attributed this loosening to the withdrawal of metal cations which cross-link a protein-gel that acts as a cementing substance between these cells. Sedar and Forte ('63) have produced a depletion of the intercellular opaque material of the desmosome in gastric mucosa by *in vitro* treatment with 1 to 4 mM EDTA, which is reversible upon the addition of Ca. Disruption of various microtubules can be produced or potentiated by treatment with EDTA, which presumably acts by withdrawal of Ca from the cell membrane and/or the cell wall (Merle and Nickerson, '63; Repaske '58; Koller and Hartwell, '61; Humphrey and Vincent, '62; Hemmens, '63). Danielli and Davson ('64) have indicated that the adjacent lipo-protein molecules which constitute the plasma membrane are cross-linked with calcium ions which decrease the permeability (and therefore the solubility) of the plasma membrane. Accordingly one might speculate about the possible relationship between the chelation of calcium and the observed disruption of membranes.

Cellular structure and function

Electron micrographs of cementoblasts bear a general resemblance to the published electron micrographs of such collagen producing cells as fibroblasts (Karrer, '60; Kajikawa, '61; Peach, Williams and Chapman, '61; Ross and Benditt, '61; '62; Movat and Fernando '62; Fernando and Movat, '63) and osteoblasts (Kneese and Knoop '58; Dudley and Spiro '61; Cameron, '61) particularly with regard to the highly developed endoplasmic reticulum. The work of Palade and Sleskova ('56) among others indicates that

the rough surfaced endoplasmic reticulum is related to protein synthesis.

The delicate paired clusters of ribosomes seen in cementoblasts are similar in appearance to arrangements of ribosomes seen in cells known to be forming collagen. Hemoglobin synthesis has been related to a cluster of ribosomes which is termed a polyribosome or polysome (Warner Rich and Hall, '62). It is possible that the arrays of ribosomes seen in collagen producing cells may bear some special relationship to the formation of collagen precursors (Ross and Benditt, '64).

Presumably the rough surfaced endoplasmic reticulum discharges collagen precursors into the cisternae. There are no collagen fibrils within the cisternae however. The flocculent, granular or filamentous material seen in the cisternae may represent some precursor of collagen precipitated by the fixation. The contents of the cisternae pass out of the cell and the molecules may then aggregate to form fine fibrils of less than 100 Å in diameter. These fibrils do not exhibit any periodicity. It has been inferred that such fibrils are precollagenous in nature (Porter and Pappas '59; Godman and Porter '60; Chapman, '61; Peach, Williams and Chapman, '61; Ross and Benditt, '61; Fernando and Movat, '63). While direct evidence is lacking it has been presumed that additional molecules then aggregate side to side on the fine fibrils to form typical collagen fibrils.

It is highly probable that cementoblasts function in a manner similar to other collagen forming cell types and form the collagen fibrils of the cementum and the adjacent periodontal ligament. On the other hand one cannot exclude the possibility that cells which lie a short distance from the cementum, but not immediately adjacent to it, may also contribute to these fibrils.

In addition to fibrillogenesis and cementogenesis, the cementoblasts may also be involved in the formation of lytic substances. Formational and lytic activity is apparent in osteocytes (Baud, '62). Enzymes capable of breaking down the collagen have been demonstrated in bone cells (Woods and Nichols '63) and in other connective tissues cells (Gross, Lapiere and Tanzer '63). It is possible therefore

that the cells of the periodontal ligament possess the means of maintaining the cementum and its associated fibrils by lytic as well as formational activity

Fibers of the periodontal ligament

The periodontal fibers transmit forces exerted in biting to the bone and stabilize the tooth in its socket. It has been assumed that in order to do this the fibers travel directly from the cementum to the bone (v Brunn, 1891). An earlier concept pictured the ligament as organized in two sets of fibers, one attached to the cementum the other to the bone (de Terra, '11) consistent with the organization of fibers within the dental sac. This earlier concept has been revised and re-introduced by Sicher ('23 '59) who postulates that there is an intermediate plexus which represents a splicing or braiding together of both sets of fibers in the center of the ligament. An intermediate plexus ostensibly would permit a continued adaptive readjustment between the two fiber sets thus mediating eruption while still maintaining tooth attachment. Continuous durable fibers firmly attached to both bone and cementum it was argued would prevent tooth eruption. On the other hand, fibers inserted and interwoven in an intervening zone of irregularly arranged argyrophilic fibers could be continuously rearranged during eruption and still maintain a functional attachment (Sicher '23 '59). The possible adaptive mechanism of this plexus as suggested by Wassermann '51 consists of a splitting or fraying of fibers into fibrils and protofibrils which reassociate with similar fine units of adjacent fibers permitting the escalation of the tooth.

A subsequent suggestion by Wassermann, '56 that fibrolysis may provide a store of molecular components which are immediately reconstituted into fibrils, implies that fibrils can be disconnected and reconnected. Further radioautographic and electron microscopic findings indicate that the cells of the ligament are actively synthesizing protein. Within one hour after administration of H^3 Proline cells in the periodontal ligament of the rat molar are labeled; in 4 to 12 hours the label is found over collagen fibers (Crumley '62; Stallard, '63). The cells of the periodontal

ligament of the rat incisor shown in figures 10 and 11 contain an extensive endoplasmic reticulum and fine extracellular fibrils are found adjacent to these cells. Such findings are similar to those observed in other collagen forming systems.

Since there is no indication that collagen fibrils splice or join at an ultrastructural level, and since a chemical bonding between adjacent fibrils is highly unlikely because they are separated by distances much larger than 5 Å, other explanations must be sought. There is the possibility that the ground substance may play a stabilizing role between adjacent fibrils (Jackson '53). On the other hand, the protein synthesis within the ligament may be related to the maintenance or replacement of pre-existing fibrils to facilitate both eruption and attachment.

Cementum — fibers

The embedded ends of the periodontal fibers are by convention, called Sharpey's fibers. (Sharpey 1856 had described fibers which had perforated into lamellar bone from the surrounding periosteum). Since the deep ends of these fibrils are embedded during the early phases of cementum formation one should examine their path from the dentinocemental junction to the surface for an evaluation of the relationship of these fibrils to cementum formation. The following structures, listed in order, may be evident when the cementum is examined in such manner. There sometimes is a structure adjacent to the dentinocemental junction (b.m., fig. 22) which may represent a remnant of the basement membrane of Hertwig's sheath. (Paynter and Pudy '58 Selvig, '63). There may also be many thin irregularly disposed, dense lines (d.l., figs. 14 19 20) that appear in some sections (figs. 14 20) to be continuous with Sharpey's fibrils. These, therefore, are representative fibrils which were incorporated in the cementum early in cementogenesis. Selvig, ('63) reports such fibrils are first laid down parallel or at an angle to the epithelial sheath and gradually form an irregular meshwork in the cementum. The Sharpey's fibrils turn and then course toward, and exit, from the cemental surface in a perpendicular direction (figs. 7 9 14 18 20). The zones of increased

lently which may occasionally be evident in the center and other areas of the cementum (Figs. 8, 9, 17, 18, 21, 22) may be produced by sectioning across the fibrils.

The course of the fibrils forms a curve that appears to represent the resultant of the interaction of eruptive movement and functional pull. The depth of the fibril may be considered as a factor of time since increasing portions of the periodontal fibrils are incorporated by the apposition of cementum. Thus in examining the cementum just prior to eruption, one may well be provided with a record of the deposition of fibrils extending not only back to their initial formation, but also reflecting their role in continuous eruption (Fig. 23).

H. v. Brunn (1891) has proposed, there is a detachment of old fibers from the cementum followed by an attachment of new ones, then the old ends should remain embedded in the cementum. Isolated ends, other than those produced by sectioning, are not evident in the electron micrographs. If all alterations were limited to the zone of the intermediate plexus, then the fibers that enter the cementum perpendicularly should become embedded sequentially. The observed paths of Sharpey's fibrils are curved. Therefore such a path cannot be explained by the continued incorporation of perpendicular fibrils. It is unlikely that the fibrils bend during their incorporation — Gustafson and Persson (37). It is more probable that they are less static than has been assumed and are capable of being altered and reconstructed. Such an alteration may occur as part of a generalized aggregation of collagen precursors to maintain or to re-establish fibrils throughout the periodontal ligament.

Exceptions to the described path of Sharpey's fibrils occur in the form of oblique insertions found in the proximity of cells or cellular processes (Figs. 8, 14) where the periodontal fibrils course obliquely around the cell. The embedded portion of these fibrils maintains the same oblique direction. From the depth of the oblique insertion it may be inferred that the adjacent cell was present in the same relative position earlier in the course of

eruption. Messier and Leblond '60 on the basis of radioautographic labeling find that there is an intense local proliferation of cells at the base of the rodent incisor and that labeled cells migrate along the lengthening root of the tooth. It would appear that these cells are carried along with the erupting tooth and are concerned with the maintenance of the adjacent fibrils.

Cementum — calcification

Gustafson and Persson (37) suggest that the perpendicular extension of the periodontal fibers from the cementum (in human teeth) protects the fibers, and that when tooth position is altered additional cementum is deposited in order to re-establish the perpendicularity.

Our observations indicate that the cemental surface is formed into conical projections oriented about single fibrils or bundles of fibrils in the direction of their course. The course of a fibril tends to be roughly perpendicular to the surface but, regardless, the conical projection follows the fibril, and therefore may be formed in response to fibril pull. Cemental spurs that form in the direction of prevailing stress may be observed on human teeth (Kronfeld, '28; Gottlieb and Orban, '31). Smaller tubercles also attributed to fiber pull are visible in the light microscope (Heuser '62). These spurs, tubercles and the ultramicroscopic projections might be compared with the tuberosities that form on bones in response to the pull of ligaments and tendons (Weidenreich '23; Dolgo-Saburoff '29; Petersen, '30; Amprino and Cattaneo '37; Vls '58). Where tendons and ligaments attach directly to bone without an intervening periosteum the formation of the tuberosity appears to represent a special instance of bone formation (Weidenreich, '23, '30; Kneese, '57; Vls, '58; Kneese and Biermann, '58) in which there is a direct transformation of the fibers into bone, or *tendinous osteogenesis* (Weidenreich '23; Kneese, '58). The progressive extension of calcification along the periodontal fibril may represent another example of this phenomenon. Functional pull may be only one facet of this process. Selvig (63) indicates that the mineral crystals are deposited in close association with the fibrils. One could specu-

late that physical and chemical changes at this site permit the extension of calcification along the fibrils.

Cementum — ground substance and fibrillar matrix

The cementum of rat incisors does not appear to be as extensively fibrillar as that of rat molars (Thilander '61) or of human teeth (Tonge and Boulton, '58; Awazawa, '63; Frank and Nalbandian '63). After decalcification, therefore, the interfibrillar structure becomes quite prominent. It appears to be a sponge-like network composed of circumscribed areas of less density enclosed by areas of greater density. The less dense zones are irregular and range from 150 Å to 450 Å in diameter. Structure of similar appearance has been demonstrated between fibrils in decalcified bone by Yaeger ('61) in osteoid by Durning ('58) and in rat tail tendon by Bondareff ('57). These workers have interpreted these less dense and more dense zones as ground substance. In tracing the path of a collagen fibril in the cementum it becomes apparent that the fibril is outlined by a dense component. The dense lines with which Sharpey's fibrils are continuous are similarly outlined and are apparent due to the condensation of this dense component.

SUMMARY

The cementum of rat incisors has the following organization in the region adjacent to the gingival attachment. Remnants of the basement membrane of Hertwig's sheath are sometimes found adjacent to the dentinocemental junction. Next to this zone irregular dense lines are present and run more or less parallel to the dentinocemental junction. They appear to be remnants of the irregular meshwork of fibrils formed in the initial stages of cementogenesis. They are continuous with the deeper portions of Sharpey's fibrils. The Sharpey's fibrils converge, turn, and pass outward approximately perpendicular to the surface of the cementum. The depth of the fibrils can be considered in terms of time, and their path reflects the role of fibrils in tooth eruption.

The fibrils exit from the surface of the cementum and are associated with projec-

tions of the cemental surface. These projections may be likened to the tubercles which form at the insertion of tendons and ligaments to bone. They may be formed in response to fibril pull and/or the fibril may provide a path for the advancing front of calcification.

Sharpey's fibrils with oblique insertions occur in conjunction with fibrils that course obliquely around adjacent cells. This observation and those of others indicate that the cementoblast has a long-term association with the root of the tooth and is carried along during eruption.

The cementoblasts contain an extensive endoplasmic reticulum with dilated cisternae. Fine fibrils of less than 100 Å diameter are found in close proximity to these cells. Synthesizing activity occurs in the vicinity of mature cementum and may be related to the maintenance or replacement of periodontal fibrils. The embedded fibril exhibits a continuity with its periodontal extension from the time of its initial formation to the time of eruption into the oral cavity. The embedded portion of the fibril forms a curved path and this path together with the continuation of synthesizing activity lend support to the hypothesis that tooth attachment during eruption is mediated by generalized apposition of collagen precursors to maintain or to re-establish fibril continuity.

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All electron micrographs are of tissues fixed in buffered osmium tetroxide and decalcified with EDTA. The tissues shown in the light micrographs are similarly treated unless the notation is otherwise.

Abbreviations

C, cementum	dx, dense zone
D, dentin	ofi, oblique fibril insertion
DCJ, dentinocemental junction	cb, cementoblast
PDL, periodontal ligament	cp, cell process
AB, alveolar bone	n, nucleus
GE, gingival epithelium	ne, nuclear envelope
pr, projection of cemental surface	er, endoplasmic reticulum
pf, periodontal fibril	ci, cisterna
Sf, Sharpey' fibril	m, mitochondrion
ff, fine fibril	pm, plasma membrane
dl, dense line	

PLATE 1

EXPLANATION OF FIGURES

- 1 Diagram of cross-section of rat incisor and adjacent tissues. The anterior surface of the tooth (A) faces the upper border of the diagram.
- 2 Diagram of longitudinal section of rat incisor and adjacent tissues. The anterior surface (A) of the tooth faces the left margin of the diagram.

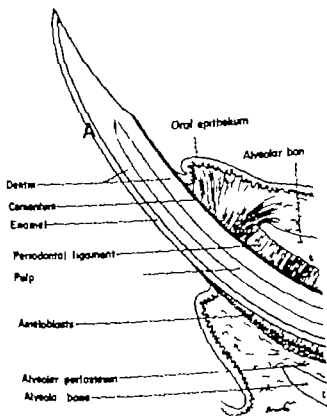
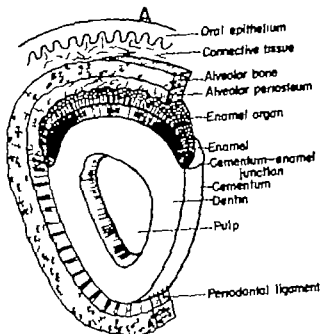


PLATE 2

EXPLANATION OF FIGURES

- 3 Light micrograph of cementum and periodontal ligament showing insertion of periodontal fibers. Formalin fixed, EDTA decalcified, embedded in paraffin. $\times 600$.
- 4 Light micrograph showing structure of the cells adjacent to the cementum. $\times 1,300$.
- 5 Light micrograph of the periodontal ligament. Cells indicate course of fibers from cementum to alveolar bone. $\times 115$.
- 6 Light micrograph showing relationship of the gingiva to the cementum. $\times 260$.

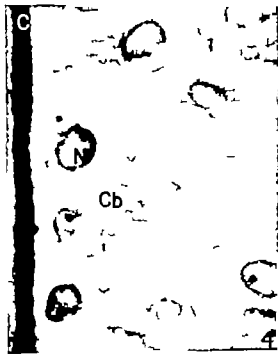


PLATE 3

EXPLANATION OF FIGURE

- " A lower magnification electron micrograph showing cementum, dentin and adjacent periodontal ligament. Portions of several cementoblasts are evident. Periodontal fibers and their constituent fibrils are shown. The periodontal fibrils course to the cemental surface in a perpendicular direction and insert into the cementum as Sharpey fibrils.
/ 9,500



PLATE 3

EXPLANATION OF FIGURE

- 7 A lower magnification electron micrograph showing cementum, dentin and adjacent periodontal ligament. Portions of several cementoblasts are evident. Periodontal fibers and their constituent fibrils are shown. The periodontal fibrils course to the cemental surface in perpendicular direction and insert into the cementum as Sharpey's fibrils.
x 9,500



PLATE 5

EXPLANATION OF FIGURE

- 9 A higher magnification electron micrograph of the cementum showing its reticular appearance and the contained Sharpey fibrils associated with the cemental projections. Magnification $\times 25,000$ (From *Orban's Periodontics* by D. Grant, L. B. Stern and F. M. Everett — C. V. Mosby St. Louis, '63)



PLATE 6

EXPLANATION OF FIGURES

- 10 Electron micrograph of a portion of cementoblast showing the extensive rough surfaced endoplasmic reticulum. Periodontal fibrils and also fine fibrils are adjacent to the cell. A cisterna is shown communicating with the nuclear envelope. $\times 17,000$.
- 11 Electron micrograph of cementoblast showing the extensive endoplasmic reticulum. Delicate paired arrays of ribosomes may be noted \uparrow the arrows. Periodontal fibrils and also fine fibrils less than 100 Å in width are indicated. Magnification $\times 19,000$.



PLATE 7

EXPLANATION OF FIGURES

- 12 Electron micrograph of a mitochondrion is shown to indicate state of preservation of membranes. Magnification $\times 12,000$.
- 13 Electron micrograph of section of plasma membrane is shown to demonstrate state of preservation. Magnification $\times 20,000$.
- 14 Electron micrograph showing a cell process of cementoblast in contact with the cementum. Periodontal fibrils are shown entering the cemental surface at the cemental projections. The fibrils can be traced to the dense lines lying close to the dentinocemental junction. Magnification $\times 35,000$.

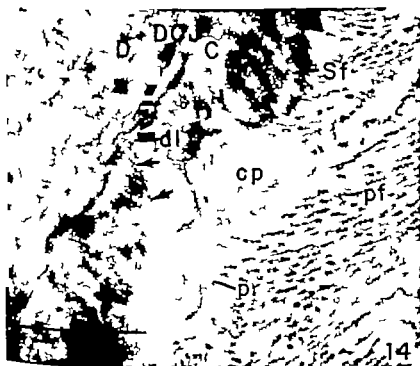


PLATE 8

EXPLANATION FIGURE

- 15 High magnification electron micrograph of cementum showing continuity of periodontal and Sharpey' fibrils. Arrows indicate periodicity of collagen. Several interperiod bands are evident. Magnification $\times 67,000$.

PLATE 9

EXPLANATION OF FIGURES

- 16 Electron micrograph of projections of the cemental surface. There is a density in the cross-section. In the longitudinal section the fibrillar structure of the density is evident. Magnification $\times 24,000$.
- 17 Electron micrograph of a projection of the cemental surface containing a central density. Compare its conical shape with the two bundles of fibril inserting into the cementum in the lower portion of the picture. Magnification $\times 31,500$.
- 18 Electron micrograph of periodontal fibrils turning to enter the cementum in perpendicular direction. Note the reticulated appearance of the interfibrillar material (arrow) in the cementum. $\times 41,000$.

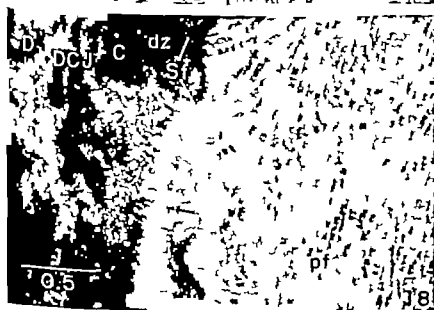


PLATE 10

EXPLANATION OF FIGURES

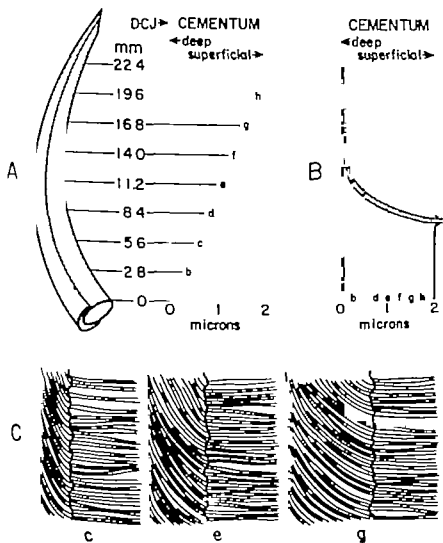
- 19 Electron micrograph of dense lines near the dentinocemental junction. They appear to be arranged more or less parallel with the dentinocemental junction. $\times 29,000$.
- 20 Electron micrograph of dense lines arranged in several diagonal layers. The arrows indicate the continuity of one of these with periodontal fibril. Magnification $\times 26,000$.
- 21 Electron micrograph showing a broad, dense zone which is seen in the center of the cementum. Such dense zones may be produced by sectioning through fibrils. Magnification $\times 31,000$.
- 22 Electron micrograph showing a clear zone and dense zone adjacent to the dentinocemental junction. This structure may represent remnant of the basement membrane of Hertwig's sheath. Magnification $\times 8,600$.



PLATE 11

EXPLANATION OF FIGURES

- 23A Points in the cementum may be interpreted in terms of time by observing the level of eruption and the width of the cementum. In this diagram an eruptive rate of 2.8 mm per week and an area rate of increase in width have been assumed. Points a through h can be analyzed according to the ordinates and abscissae of the graph.
- 23B A single fibril taken from segment in the vicinity of h of previous diagram (23A) illustrates the curved path of the fibril.
- 23C The cementum taken at points c and g of figure 23B shows the width of the cementum at each stage. The formation of the curved Sharpey fibrils from the perpendicular periodontal fibrils can be explained by a bending of fibrils or by presuming a series of dissolutions and reformations of the periodontal fibrils during their progressive incorporation into the cementum.



Histochemical Studies on Seromucous and Mucous-secreting Cells of Human Salivary Glands¹

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ABSTRACT Human salivary and lacrimal glands have been studied with variety of methods to demonstrate polysaccharides in tissue section. On the basis of these studies, an attempt has been made to clarify the classification of exocrine cells. Serous cells secrete proteinaceous material without significant polysaccharide in the secretory granules such as the pancreatic acinar cell and gastric chief cell. Seromucous cells secrete watery product, but the secretory granules contain variable amounts of mucopolysaccharide in the secretory granule. Typical seromucous cells are found in the parotid gland, lacrimal gland, submaxillary gland and eccrine sweat glands. Mucous cells liberate a viscous product rich in mucopolysaccharide. The typical mucous cell is the intestinal goblet cell. Other examples are the mucous portion of the submaxillary gland, the entire sublingual gland, bronchial gland, and Brunner's gland. Human pancreatic acinar and gastric chief cells are unique as compared to other species since the secretory granules of these cells, usually considered to be serous, contain small amount of neutral mucopolysaccharide.

Classification of exocrine glands into types based on the nature of the secretion product date from the work of R. Heidenhain (1868) who recognized a distinction between mucous and albuminous (now termed serous) glands, the former secreting viscous mucoid material, the latter secreting proteinaceous material of more watery consistency. Since that time numerous studies have characterized the structure and histochemical properties of secretory cells. This information is summarized in exhaustive reviews of Stormont ('21) Zimmerman ('27) and more recently Schälzle ('52) Leblond ('50) proposed a major revision in the classification of glandular cell types based on the intense PAS positivity (diastase-resistant) of secretory granules in the rat parotid gland. This reaction indicated the presence of a distinct carbohydrate moiety within the secretory granules of a cell classically regarded as serous. Thus, Leblond ('50) proposed that the parotid gland be termed "seromucoid" as distinct from the pancreatic acinar cell and gastric chief cell of purely serous nature. Recently Shackelford and Klapper ('62) have reinvestigated the carbohydrate histochemistry of the salivary glands of various species, and based on their findings they propose to use

the term seromucous for those glands containing an acidic mucopolysaccharide in the secretion product. The parotid gland in their opinion is serous in nature.

The importance of these considerations is manifold. First, to understand the cellular mechanisms involved in glandular secretion, cells of similar function must be recognized as such. Secondly the variations in secretory products of a group of cells must be understood at the cytologic level to provide meaningful interpretations of the biochemical data relating to the secretory product of the gland *in vivo*. Finally these considerations are related to concepts as to the pathogenesis of cystic fibrosis of the pancreas which has been variously considered as a generalized disease of exocrine glands, a disease of mucous glands, and by the present author and co-workers (Munger, Bruslow and Cooke, '61) as a disease of mucous and seromucous glands. The present study is an attempt to elucidate the relationships of the serous, mucous, and seromucous cells of the human exocrine glands.

This study was supported in part by research grant E-201 from the American Cancer Society, and United States Public Health Service grants GM-03784 and GM 10102 from the Institute of General Medical Sciences.

Formerly Captain, USAF MC (Ret.).

MATERIALS AND METHODS

Well preserved human tissues were obtained from the material presented to the department of surgical pathology and were fixed in 10% formalin or 10% neutral buffered formalin. The tissues studied included 3 parotid 4 submandibular 2 sublingual, 2 lacrimal glands, 2 portions of pancreas and 2 sections of fundic mucosa of the stomach. The tissue was embedded in paraffin and sectioned at 5-8 μ . Sections were stained with the PAS technic (Lillie, '54) always with diastase digested controls, toluidine blue at pH 5.6 for metachromasia (Lillie, '54) alcian blue (Mowry '56) colloidal iron (Mowry '58) aldehyde fuchsin (Spicer and Meyer '60) the combined alcian blue-PAS technic (AB-PAS) (Mowry '56) and the combined aldehyde fuchsin-alcian blue technic (AF AB) (Spicer and Meyer '60).

OBSERVATIONS

Based on arguments presented in the discussion the following definitions will be used throughout the present report:

Serous cell. A cell secreting a "watery" product, containing no demonstrable polysaccharides in the secretory granules.

Seromucous cell. A secretory cell, usually considered to be serous but containing demonstrable polysaccharide in its secretory granules (Leblond, '50).

Mucous cell. Cells resembling goblet cells of the intestine in histologic and histochemical characteristics secreting a viscous product rich in polysaccharide.

The secretory granules of the acinar cells of the human parotid gland are intensely eosinophilic and intensely PAS positive (figs. 1, 2, 3). The intensity of the PAS reaction does not diminish with diastase treatment. The PAS positivity is exactly limited to the individual secretory granules and delineates them from the surrounding cytoplasm. In sections stained with colloidal iron (fig. 4) and alcian blue, only a faint diffuse background staining is present throughout the cells. This type of cell is termed a seromucous cell based on arguments presented in the discussion.

Small PAS positive granules are likewise present in the apical cytoplasm of the secretory duct (fig. 3). Other staining

reactions of these granules could not be exactly determined, but they were most certainly not strongly positive with alcian blue or colloidal iron. Aldehyde fuchsin and mucicarmine stains are negative and no metachromasia is present in human parotid glands. The combined technic (AB-PAS AF AB) are not informative.

In rare instances a mucous acini with or without a seromucous demilune (serous demilune) are present in the human parotid gland, similar to those of the submandibular gland. No goblet cells were observed in the ductal system. No significant variation was observed among different specimens studied.

The lacrimal glands of man are identical in all respects to the parotid in staining characteristics.

Human submandibular glands are predominantly seromucous (serous) and contain scattered mucous acini which in some instances are capped by seromucous demilunes (fig. 5). The mucous elements are positive with virtually all of the stains employed in the present study (figs. 6-12), except they are not eosinophilic. Mucous cells are PAS positive (diastase resistant), alcian blue positive, colloidal iron positive aldehyde fuchsin positive, metachromatic with toluidine blue, and mucicarmine positive. The intensity of a given staining reaction in these mucous acini varies from cell to cell. Whereas PAS stains uniformly all mucous cells, aldehyde fuchsin (fig. 8) toluidine blue (figs. 9-10) alcian blue (fig. 11) colloidal iron (fig. 12) stain irregularly. The metachromasia with toluidine blue and the reaction to aldehyde fuchsin (figs. 8, 9-10) are the most variable some mucous cells reacting weakly others intensely. This variability of reactivity cannot be correlated with the quality of cytologic preservation or proximity to the edge of the block of tissue. The intensity of reaction of alcian blue (fig. 11) is more uniform. Colloidal iron produces an appearance in the mucous cells of very dark blue staining material clumped in masses with the intervening cytoplasm clear. The result is a reticulated appearance to the cytoplasm of a single mucous cell. The combined alcian blue-PAS stain results in a confusing picture. Some cells and occasion-

ally entire mucous acini will stain obviously blue, others red and still others a reddish purple. Thus gradations are present between alcian blue positive and PAS positive mucous acini in the same gland. A similar admixture of colors results from the combined aldehyde fuchsin-alcian blue stain. All types of reactivity can be seen within a single mucous acinus or between different acini. Unfortunately these preparations are impossible to illustrate successfully in black and white reproduction since all cells will appear dark grey.

The zymogen granules of the seromucous portion (usually considered to be serous) of the submandibular gland stain in a manner similar to that of the parotid gland. They are eosinophilic and PAS positive, and negative with mucicarmine, alcian blue, colloidal iron, and aldehyde fuchsin. Ducts containing distinct secretory granules could not be identified in the submandibular glands.

Some acini within the submandibular gland have a predominantly serous appearance but the amount of PAS reactive material in the apex of the cell is much greater than in surrounding seromucous acini (figs. 6-7). Such cells resemble the cells of mucous acini containing fewer secretory vacuoles than usual, but the cells do not appear to be classical mucous-filled cells. In careful examination of the other stains mucous acini are present in which the cells have only sparse secretory granules which react with colloidal iron, alcian blue, and aldehyde fuchsin. These cells are considered to be small mucous cells based on arguments presented in the discussion.

Each specimen examined presented identical histochemical characteristics, if well preserved. However in large blocks of tissue secretory granules of acinar cells could not be stained in the central portion of the block. If secretory granules could not be removed and hence the stainability of some clearly delineated from that of the background cytoplasm, the results in these areas were disregarded.

The sublingual gland in H and E stained preparations appears to have a mixed complement of cells (figs. 13-14). Individual acini of the sublingual gland vary in the types of cells they contain. While some

acini contain large mucous-filled cells, other acini are composed of cells with few secretory granules. All gradations can be found between these two extremes. It is impossible on the basis of appearance to decide if many acini are mucous or seromucous.

However on the basis of the other stains employed, no clearly defined seromucous cells could be identified in the human sublingual gland. A variability in staining reactions is present, best illustrated by toluidine blue metachromasia (fig. 15) and the PAS technique (fig. 16). The PAS reaction (fig. 16) is uniformly intensely positive throughout the gland, varying only in the number of PAS positive secretory granules in the apices of the cells. Toluidine blue metachromasia (fig. 15) mucicarmine (fig. 17) colloidal iron (fig. 18) alcian blue (figs. 19-20) and aldehyde fuchsin (fig. 21) all evidence a variable reaction throughout the gland. Yet even those cells containing scant secretory vacuoles are positive for acidic components, unlike seromucous cells of the parotid or submandibular glands. In cells having scant secretory granules, the granules are intensely positive with both alcian blue and colloidal iron. Aldehyde fuchsin, on the other hand, is less reactive in the sparsely granulated cells and of variable strong intensity in the mucous-filled cells. In the AB-PAS procedure some cells (as described by Quintanelli, '61) are predominantly colored by one or the other and some cells take both colors becoming deep lavender or purple. The lightly granulated cells are always colored with alcian blue, the mucous-filled cells by PAS alcian blue or both stains. In the combined AF-AB technique a similar variability is present, sparsely granulated cells are alcian blue positive, mucous-filled cells are aldehyde fuchsin positive or mixed in color.

Human pancreatic acinar cells exhibit a weak to moderate PAS positivity in the apical region of the cell which appears to be roughly confined to the area of individual zymogen granules (fig. 22). This observation confirms that of Little ('60). By way of contrast, goblet cells in the pancreatic duct in the same specimen will stain intensely PAS positive similar

to the parotid gland but the zymogen granules of the pancreas are only weakly positive. The zymogen granules are alcian blue aldehyde fuchsin colloidal iron and mucicarmine negative.

The human gastric chief cells are similar in staining characteristic to human acinar pancreas. The individual zymogen granules are not PAS positive, but the apical region of the chief cells is diffusely stained. Mucous cells in the surface are also PAS positive. It is not possible to ascertain the quality of preservation of this specimen since gastric mucosa obtained at surgery is difficult to preserve.

By way of contrast, we also studied cat salivary and lacrimal glands and our findings confirm those of Shackelford and Klapper ('62). The cat parotid secretory granules are eosinophilic intensely PAS colloidal iron and alcian blue positive (figs 23-24) but not metachromatic nor are they mucicarmine positive. The secretory ducts also contain PAS positive secretory granules. The submandibular gland is mixed seromucous and mucous elements have similar staining properties. I.e. PAS alcian blue and colloidal iron positive (figs. 25-26-27). Mucous elements however stain irregularly with colloidal iron and alcian blue similar to those of the human. Secretory ducts also contain PAS positive secretory granules.

The cat lacrimal glands contain weakly PAS alcian blue and colloidal iron positive secretory granules.

DISCUSSION

Based on the information available to date the exocrine gland cells of mammals can be characterized as being purely serous (pancreas and chief cells of the gastric fundic glands in most species and most likely human as well) purely mucous (sublingual mucous portions of the submandibular Brunner's glands, bronchial mucous glands etc.) and seromucous (parotid seromucous (serous) portion of submandibular lacrimal Paneth cells and mucoid cells (Munger '61) of the eccrine sweat glands). The basis for this classification rests on the histochemical nature of the secretory product of the cells. As Stormont ('32) points out the pancreatic acinar cell is the prototype of

the serous cells, and the zymogen granules of the pancreas of most species are unreactive with PAS (Lillie, '50) or with any of the other known methods for demonstrating carbohydrates. A similar cell is the chief cell of the fundic glands. These two cells are known to secrete digestive enzymes but substances present with zymogen granules other than the specific digestive enzymes are not known. With the term sero-zytogenic as proposed by Stormont ('32) for such cells is appropriate the term serous or zymogenic is adequate and concise characterizing their functional capabilities and their secretory process.

The term seromucoid has been used previously in the literature with rather implications and definitions. Schaffer ('08) used the term with respect to a gland that had a mixed cellular composition i.e. the submandibular gland was a seromucous. Dr. Stormont ('32) called the cells of the parotid "seromucous" in the introduction to his paper but later in the same article proposed the term "special serous" for these cells. Leblond ('50) noting the carbohydrate moiety present in the mouse parotid gland termed these cells seromucous, denoting a cell classically considered to be serous but secreting as one of its products a carbohydrate. More recently Shackelford and Klapper ('62) defined seromucous as those cells of the salivary glands containing acidic carbohydrates in the secretory granules. As pointed out in the present study and by Lillie ('50) the acinar pancreas and gastric chief cell do not contain appreciable amounts of mucopolysaccharide in most species. If we consider such cells as the prototype of serous cells then the parotid and lacrimal glands are distinctly different. These latter glands do secrete a mucopolysaccharide and fit Leblond's ('50) criteria for being seromucous cells. The present report has added substance to Leblond's ('50) concept and emphasizes the differences of glandular histochemistry which markedly parallel differences in glandular function. Shackelford and Klapper ('62) have emphasized the acid moiety of the secreted carbohydrate and as a result of this reasoning the mucous portions of submandi-

salivary and sublingual glands are also considered as being seromucous. Yet by structure (Ferner and Ganaler '61; Leeson

Jacoby '59) as well as histochemical

(Lillie, 49 Schälitzle, '62) these

cells, usually referred to as mucous, are

similar to goblet cells of the intes-

tal (Falry '58) and cells of Brunner's

glands of the bronchial mucous glands (Spicer

J. Similarities in the chemical nature

of viscosity (Gottschalk and Thomas

) of the cellular secretions of these

cells are not presently known. How-

ever, to consider submandibular mucous

as seromucous would mean that cells

of Brunner's glands or bronchial mucous

might also be considered as serous

since they too react with methods

that demonstrate acidic carbohydrate. This

possibility leads, then, to denying

the existence of a mucous cell.

In an attempt to clarify these problems

it is proposed to classify glandular secre-

tions as follows: Cells possessing cytologic

and histochemical evidence of mucous

secretion (the goblet cell being the proto-

type) should be termed *mucous*. Cells

secreting a "watery" secretion usually

containing enzymes and lacking polysac-

charides in the secretion product (acinar

cells of most species being the proto-

type) should be termed *serous*. Cells cyto-

logically similar to serous cells but con-

taining polysaccharide in the secretory

product should be termed *seromucous* as

suggested by Leblond ('50) (the parotid

being the prototype) regardless of

the nature of the carbohydrate moiety

The biochemical properties of the secre-

tion of a seromucous cell, exemplified by

secretory cells of parotid gland, are

presently poorly understood. As contrasted

with the submandibular gland, the parotid

gland has received little attention from

biochemists (Nishizawa and Pigman, '59

Nishizawa and Pigman '60 Quintanelli,

et al., '61). The salomucins are known

to be largely responsible for the acidic

carbohydrate moiety of submandibular

secretin, but the nature of carbohydrates of

parotid origin is not known. Understand-

ing the biochemical nature of parotid se-

cretion is hindered by the histochemically

observed species variation (Lillie 49;

Jackelford and Klapper '62). Yet, de-

spite this biological diversity one point is constant, i.e., the parotid gland cells of all species studied to date contain a histochemically demonstrable carbohydrate moiety in the secretory granules.

The pancreatic acinar cell and gastric chief cells are usually regarded as being unreactive with histochemical methods to demonstrate carbohydrate. But, as pointed out by Lillie ('50) human tissue is somewhat of a biological curiosity. Whereas most species are unreactive a distinct but weak reactivity is present in the region of the zymogen granules of human pancreatic acinar cells and gastric chief cells. It is difficult to assess the importance of the weak PAS-positivity of these zymogen granules. The carbohydrate component of the zymogen granules of pancreas and gastric chief cell is relatively insignificant when compared to the carbohydrate component of other seromucous cells. In addition, the proteins or lipids in the zymogen granules of the pancreas could be responsible for this PAS-positivity. No histochemical proof exists that this PAS-positivity indeed indicates a carbohydrate. Until the biochemical properties of seromucous secretion (parotid) have been compared to that of the pancreas, the seromucous component of pancreatic acinar secretion must remain undefined. On the basis of present knowledge we regard the pancreatic acinar cell as most likely being purely serous.

The submandibular gland of most species is a mixed gland containing seromucous acini, similar in properties to acini of the parotid gland, combined with varying numbers of mucous acini. Sialic acid is a very prominent component of this glandular mucoprotein (32% in bovine submandibular gland mucin (Nishizawa and Pigman, '59) and variable but prominent in dog submandibular saliva (Diache et al., '62)). Since acid hydrolysis and treatment with influenza virus neuraminidase abolish the acidic properties of the mucous acini (Quintanelli et al. '61) the mucous acini most likely secrete a sialomucin. But, the PAS reactivity of the mucous acini is only slightly decreased by such treatment and the PAS reactivity of the seromucous demilunes is not affected. While the evidence is good that the mu-

PLATE 1

EXPLANATION OF FIGURES

- 1 Human parotid gland, H and E. The acinar cells are filled with eosinophilic secretory vacuoles (black in photomicrograph) $\times 385$.
- 2 Human parotid gland, H and E. A higher magnification of the preparation seen in figure 1 $\times 1,200$.
- 3 Human parotid gland, PAS. The secretory vacuoles of the acinar cells are intensely positive. Very small PAS positive secretory granules can be seen in the apex of the duct cells. $\times 1,200$.
- 4 Human parotid gland, colloidal iron. No distinct reactivity is present; only diffuse background staining. $\times 395$.

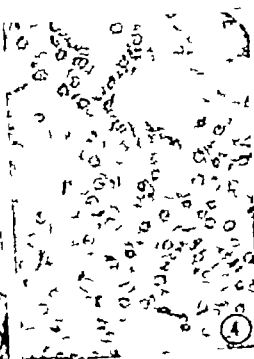


PLATE 1

EXPLANATION OF FIGURES

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- 4 Human parotid gland, colloidal iron. No distinct reactivity is present; only a diffuse background staining. $\times 393$.



PLATE 3

EXPLANATION OF FIGURES

- 9 Human submandibular gland, toluidine blue. The mucous acini are variably but definitely metachromatic (dark grey) $\times 100$.
- 10 Human submandibular gland, toluidine blue. The sharp line of demarcation between the metachromatic (grey) and orthochromatic (colorless) staining of mucous and seromucous acini can be seen. $\times 395$.
- 11 Human submandibular gland, alcian blue. The mucous acini alone are intensely reactive (dark grey) $\times 395$.
- 12 Human submandibular gland, colloidal iron. The mucous acini react in an irregular but intense manner; the intense blue color is usually limited to the cell margins. $\times 395$.

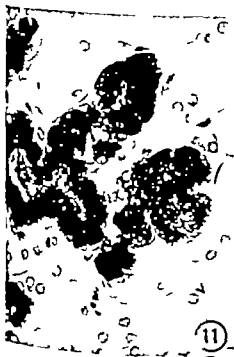
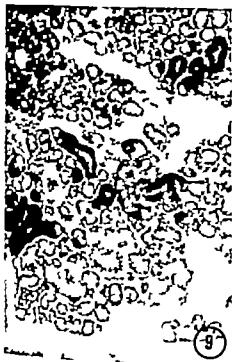


PLATE 4

EXPLANATION OF FIGURE

- 13 Human sublingual gland, H and E. The gland appears homogeneous and consists of one type of acinus. $\times 100$.
- 14 Human sublingual gland, H and E. The acinar cell contain varying amount of mucinous material in the apical cytoplasm. $\times 395$.
- 15 Human sublingual gland toluidine blue. Varying degrees of metachromasia are present (the cytoplasm having varying shades of grey in the micrograph) $\times 100$.
- 16 Human sublingual gland, PAS. All acinar cell contain PAS positive material in the apical cytoplasm. In some cell this can be resolved as discrete granules; in others as confluent masses or in intermediate conditions. $\times 395$.

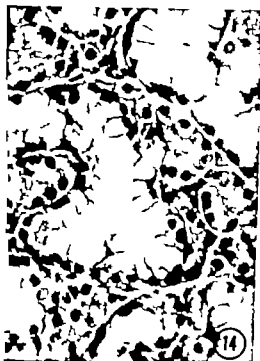


PLATE 5

EXPLANATION OF FIGURES

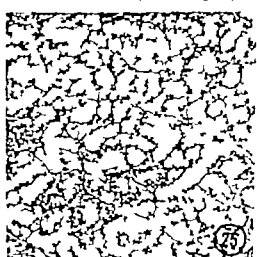
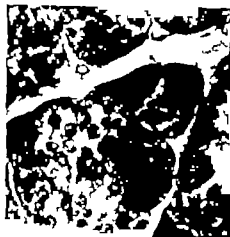
- 17 Human sublingual gland, mucicarmine. The dye is taken up irregularly from cell to cell. $\times 393$
- 18 Human sublingual gland, colloidal iron. The entire gland stains irregularly as do mucous cells of the submandibular gland. $\times 100$.
- 19 Human sublingual gland, alcian blue. The variability of staining is evident as different shades of grey in the micrograph. $\times 500$
- 20 Human sublingual gland, alcian blue. Distinct secretory granules can be seen in some cells and confluent masses in others. $\times 500$.
- 21 Human sublingual gland, aldehyde fuchsin. Marked differences are present in the reactivity from cell to cell. $\times 500$



PLATE 6

EXPLANATION OF FIGURES

- 22 Human acinar pancreas, PAS. The apical portion of the acinar cells is PAS positive $\times 500$
- 23 Cat parotid gland, H and E. The secretory vacuoles are weakly eosinophilic. $\times 110$.
- 24 Cat parotid gland, colloidal iron. The secretory vacuoles are intensely positive $\times 110$.
- 25 Cat submandibular gland H and E. The gland is predominantly mucous but some serous (?) demilunes can be seen. $\times 110$.
- 26 Cat submandibular gland, colloidal iron. A mottled but intense reactivity is present throughout the gland. $\times 110$
- 27 Cat submandibular gland alcian blue. A homogeneous and intense reaction is present in all secretory cells. $\times 110$.



Spermatogenesis in Animals as Revealed by Electron Microscopy

I. THE FINE STRUCTURE AND FUNCTION OF ENDOPLASMIC RETICULUM AND OF PECULIAR BODIES APPEARING IN ATYPICAL MATURING SPERMATIDS AND NUTRITIVE CELLS OF CIPANGOPALUDINA MALLEATA REEVE^{1,2,3}

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ABSTRACT In an early stage of metamorphosis of typical spermatids of pond snail, *Cipangopaludina malleata* Reeve, numerous vesicles of a circular form appear in the juxtanuclear region. These vesicles represent the rough surfaced endoplasmic reticulum of the typical spermatids. As amorphous contents within the vesicles increase in density an amount, Palade granules 130 to 150 Å in diameter attached to the external surface of the vesicles, disappear gradually and at the same time an apparently single layered limiting membrane is transformed to double layered structure.

It has been revealed that a Feulgen-positive material appearing in the vesicles transforms into PAS-positive material in the atypical maturing spermatids, and such material is transported as D bodies through intercellular spaces into the nutritive cell. In the nutritive cell, G bodies make their appearance as transitional form of mitochondria. Structural changes from homogeneous appearance to concentric and parallel lamellar structures have been traced in both bodies. It is noticeable fact that lamellar structure is often found surrounding an electron-lucent space of both bodies. An occurrence of the electron-lucent space within both bodies suggests that the contents of the bodies may be transported via the tubular system of the endoplasmic reticulum in the mantle to the typical maturing spermatids.

Tornabelli's blue tests have shown that the dense particles, 50 to 70 Å in diameter appearing in the D and G bodies are organic iron compounds. It is interesting that lipid is found in helical appearance along the typical maturing spermatid head part, suggesting that lipid is located in the cytoplasm surrounding the nucleus.

As the development of typical spermatids of a pond snail, *Cipangopaludina malleata* Reeve proceeds, numerous elongate pseudopodia develop from the surface of the nutritive cell and extend towards the lumen of the seminiferous tubule. These greatly elongated pseudopodia approach the maturing spermatids and adhere to the surfaces of their heads and middle pieces. The nutritive cell pseudopodia coalesce forming a sheet which takes the shape of a thin-walled mantle. As the development of the pseudopodia proceeds dense mitochondria and large inclusion bodies of varying density gradually increase in number in the nutritive cell. When the typical spermatids have reached a certain degree of maturity they are set free leaving the mantle empty. At this stage the

inclusion bodies and the mitochondria decrease remarkably in number. Thus it has been suggested that these cytoplasmic components function as nutritive substances which pass from the cytoplasm of the nutritive cell into the spermatids through tubular elements of the endoplasmic reticulum in the mantle (Yasuzumi, Tanaka and Tezuka, '60).

While numerous light microscopic studies have dealt with the characterization of the chemical nature of granular ele-

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ments appearing in the Sertoli cells of vertebrates relatively little attention has been paid to the origin or fine structure of these granules (Leblond, '50 Arzac '50; Montagna and Hamilton, '51 '52 Mancini, Nolasco and De La Balze '52; Cavazos and Melampy '54 and Daoust and Clermont, '55) The present study is oriented towards elucidating the origin the chemical constitution and the fine structure of bodies appearing in the nutritive cell.

It has already been revealed at a high magnification that the smooth-surfaced vesicular elements of endoplasmic reticulum which contain dense granules are limited by a double layered unit membrane in atypical maturing spermatids of the pond snail (Yasuzumi, Tanaka, Teruka and Nakano '59) But the relation between the fine structure of the limiting membrane of these vesicles and their contents has remained unknown. The description of this structural pattern and a discussion of its functional significance form the topics of this paper

MATERIAL AND METHODS

Fixation and embedding destined for electron microscope study The testes of *Cipangopaludina malleata* Reeve were fixed in 1% osmium tetroxide adjusted with Veronal acetate buffer to pH 7.3 without NaCl. Fixation was continued for one hour at 10°C. After fixation the tissue was dehydrated without washing in distilled water using a graded series of ethyl alcohol solutions. The tissue was impregnated with a solution containing absolute alcohol and mixture (a a) of 20% methyl methacrylate and 80% *n*-butyl methacrylate for one hour at 18°C. The blocks were finally embedded in the same resin, with polymerization effected by 2,6-dichlorobenzoyl peroxide at 46°C.

Microtome and electron microscope For comparative examination of cytoplasmic components appearing in the nutritive cell and the spermatids with the electron and light microscopes alternate thin (about 10–20 μ) and thick (about 1 μ) sections were cut with glass knives on either a Porter Blum microtome or a Shimadzu microtome. Thin sections were examined in a Siemens electron microscope Elmiskop I or an Akashi electron microscope model

TRS-50 or an electron microscope of the Japan Electron Optics Company model-JEM T5. Micrographs were taken at magnifications ranging from 2,000 to 40,000.

Ordinary light microscopy and cytochemical tests The thick sections were affixed to glass slides and the embedding material was removed with amyl acetate. After 15 minutes of hydrolysis they were stained with the Feulgen technique. The periodic acid-Schiff reaction for 1–3 glycol linkages (McManus '48 Hotchkiss, '49) was performed on other similar sections, which were previously treated with or without saliva. Some specimens were then counterstained with 0.1% methylene blue. Methyl green-pyronin stain was applied to paraffin sections fixed in absolute alcohol. Control sections were treated with ribonuclease before they were stained with the methyl green-pyronin.

Procedure for organic iron compounds (Macallum, '08).

1. Testes were fixed in 95% alcohol for 24 hours.

2. Washed in iron-free distilled water for a few minutes.

3. Placed in 5% gelatine solution for two hours at 40°C.

4. Placed in 5% formalin for 30 minutes.

5. Frozen sections were placed in the organic conversion solution (4% sulfuric acid in 95% alcohol) for 4 days at 38°C.

6. Sections were washed in 90% alcohol followed by iron free distilled water.

7. Placed in Turnbull's blue reagent for 20 minutes.

8. Washed in water containing codal.

9. Dehydrated and mounted in benzoin balsam.

Procedure for inorganic iron compounds. The material mentioned above was stained with the Turnbull's blue reagent without treatment with the organic iron compounds solution.

RESULTS

Endoplasmic reticulum containing amorphous substances or dense granules in the atypical spermatids. At an early stage of the metamorphosis of the atypical spermatid the interspace between the two layers of the nuclear envelope is clearly visible. A considerable number of vesicles in a circular form appear in the juxtanuclear re-

gon. The vesicles contain only a fine flocculent precipitate similar to that present in the perinuclear space. The limiting membrane of the vesicles appears apparently to be a single layer. These vesicles represent the rough-surfaced endoplasmic reticulum of the atypical spermatid. Small dense Palade granules 130 to 190 Å in diameter are found attached to the surfaces of the vesicles and isolated in the cytoplasmic matrix. The nucleus contains a large number of small granules which, in general, appear to be disposed at random, although in some places they seem to be arranged in short, coiled strands (fig. 1).

As the metamorphosis of the atypical spermatid proceeds, the amorphous substance in the vesicles come to be aggregated gradually into denser masses. At the same time, the apparently single layered limiting membrane of the vesicles tends to be transformed into a compound structure consisting of two dense lines with a separating less dense zone (fig. 2). This limiting membrane corresponds to Robertson's unit membrane (Robertson '57-'59). The amorphous substance of low density within the vesicles is aggregated into denser masses, leaving a clear area around them. The Palade granules disappear gradually from the surface of the vesicles and at the same time their limiting membranes become thicker assuming a double layered or unit structure (figs. 3, 4 and 5). Some of the vesicles containing a dense mass lie in close association with the plasma membrane and appear to open through a pore into the intercellular space (figs. 3 and 4). In more advanced stages, the large dense granules can be seen isolated in the intercellular space (figs. 4, 9, 10, 11 and 12).

At a late stage of metamorphosis of the atypical spermatids most of the vesicles become filled with dense granules of varying size and number. On the other hand, it is very difficult to find manifestations of the rough-surfaced endoplasmic reticulum in any area of the cytoplasm (fig. 6). A voluminous Golgi complex is usually situated in the juxtanuclear region. As the metamorphosis of the atypical spermatid proceeds, the nucleus moves towards the anterior pole of the cell body while the Golgi complex appears to be displaced in

the opposite direction and is usually found in the posterior part of the cell, which contains lamellae granules and vesicles of different sizes. In the Golgi zone vesicles containing dense granules are scarcely visible (fig. 6).

At later stages in which the atypical spermatids show a considerable elongation, the vesicles containing dense granules come to be concentrated at the periphery of the cell and occasionally contain relatively large dense granules which presumably arise from the fusion of smaller intravesicular granules. One can see clearly that some of the dense granules are discharged into the intercellular space, while most of the vesicles containing large dense granules become concerned with the formation of the sheath of the middle piece of the atypical spermatid (fig. 7). As Yasuzumi and Tanaka ('58) and Yasuzumi, Tanaka and Tezuka ('60) have already reported, the nucleus is reduced to a thin arched profile which envelops a bundle of tail filaments. The nucleus comes to be lodged in a deep indentation of the nutritive cell, where the substance of the atypical spermatid is separated from the cytoplasm of the nutritive cell by their respective cell membranes (fig. 7).

Cytochemical observations of the atypical spermatid. In early stages the cytoplasm of the atypical spermatid is uniformly basophilic, revealing a positive RNA-reaction. In the middle stage of its development the cytoplasm is filled with numerous vesicles containing fine granules which give a positive Feulgen-reaction but the sheath of the middle piece, which is composed of a series of vesicles containing dense granules, fails to stain with basic dyes and shows a strong positive PAS-reaction (fig. 19).

Dense bodies appearing in the nutritive cell. At the early stage of spermatogenesis, dense mitochondria and elements of endoplasmic reticulum composed of variable sub-units can be seen in the nutritive cell. The endoplasmic reticulum appears in the form of small rounded oblong profiles of vesicles. They are often arranged in rows and some of them may presumably represent sections through tubules (fig. 8). As spermatogenesis proceeds, numerous dense bodies of different

forms appear in the nutritive cell (figs. 7 9 10 11 and 12). Figure 9 shows cells in which the atypical spermatid cytoplasm and the adjacent cell surface of the nutritive cell are in a state of vigorous activity with similar dense granules seen within the vesicles of the atypical spermatid within the intercellular space and in invaginations of the nutritive cell membrane. The dense material in the invaginations of the nutritive cell increases in amount and accumulates to form a dense body having an irregularly festooned outline and an inhomogeneous appearance. Such bodies will hereafter be referred to as "D bodies." It is noticeable that the plasma membrane shows a wide or narrow area of defect or discontinuity in regions immediately adjacent to the D body. Denser particles 50 to 70 Å in diameter are visible at the periphery of the body (fig. 10).

An interesting complex structure is found in an oval-shaped D body 1.7–2.4 μ in diameter which displays numerous laminated structures of varying size shape and density. Here many ill-defined electron-lucent spaces occur in the body. Dense layers approximately 25 Å wide are arranged alternately with less dense layers 30 Å wide and dense lines and granules seem to have a tendency to become arranged in parallel or concentric array. Isolated or clustered denser particles 50 to 70 Å in diameter appear in the D body (fig. 11).

The D body 1.3–1.7 μ in diameter appearing in figure 12 is more round and more complex in structure than the one shown in figure 11. This body is limited by a double layered unit membrane and contains laminae as well as dense masses of different sizes. Apparently each layer of the laminae is not a single dense layer but a double layered structure like a unit membrane. Fine dense particles 50 to 70 Å in diameter are distributed in the masses. Numerous electron lucent spaces tend to occur at the periphery of the body.

Periodic acid Schiff reaction of the nutritive cell. An ordinary light micrograph of seminiferous tubules stained by the PAS reaction shows numerous large granules giving a positive PAS reaction in the nutritive cell where the sheath of the middle piece of atypical spermatids can

be seen (fig. 20). PAS-positive granules are found also in the Golgi zone germ cells. It has already been revealed that the Golgi zone contains a PAS positive material in other animals (Gress and Zlotnik 48 Gersh 49; Leblond at Clermont, '52 and Cavazos and Melamp '54). A positive reaction with the PAS stain is usually attributed to 1,2 glycosidic linkages and is commonly interpreted as evidence for the presence of carbohydrates.

Mitochondria and globoid bodies in the nutritive cell. Numerous mitochondria and globoid bodies, which are less dense than the D bodies, appear also in the nutritive cell to which typical mature spermatids are attached. However they are scarcely visible in the nutritive cell which are in close relation to atypical developing spermatids (fig. 7). The mitochondria are smaller and more variable in shape than those described in the typical spermatids (Yasuzumi and Tanaka, '53 and Yasuzumi, Tanaka, Tezuka and Nakano '59). Characteristically the mitochondria contain a small number of tubular or vesicular cristae and a matrix of medium density (figs. 8 10 12 14 and 16). The globoid bodies of medium or low density seem to be a transition form of mitochondria because a few mitochondria 0.2–0.3 μ in width are segregated in which their limiting membranes and internal organization are not always clearly visible. If membranes are cut very obliquely and are parallel to the plane of sections they do not show sharply (fig. 13). The globoid bodies are larger than mitochondria in size and will be hereafter designated as "G bodies." One type of G body 0.8 to 1.4 μ in diameter which may represent the first transition stage is filled with an amorphous substance of medium density in which dense particles are scattered (fig. 14 A). In the second transition stage the G body 0.8–1.2 μ in diameter is bounded by a double layered limiting membrane and contains dense particles either in random distribution or in a cluster within the matrix of low density (fig. 14 B). In the third transition stage the G bodies 0.7–1.1 μ in diameter appear being limited by a double layered membrane to contain two smaller bodies in its heterogeneous matrix: one of which

is enveloped by a double layered membrane, the other being composed of a homogeneously dense mass which is encircled by denser particles 50 to 70 Å in diameter (fig. 14 C).

Other types of G bodies in the third stage of transition can be seen at high magnification in figures 15 and 16. The one shown in figure 15 is cut so as to reveal the well defined double dense contour in its enveloping membrane. In it is an amorphous matrix concentrated in at least 5 places. Dense particles 40 to 100 Å in diameter are found in random distribution and in clusters in the matrix. The other example shows an amorphous matrix and contains lamellar structures which are arranged either concentrically or in parallel at the periphery of the body. Two smaller dense inclusions of different sizes are found in the less dense matrix. Very dense particles 50 to 70 Å in diameter, surround the homogeneously dense inclusion and are scattered in the matrix. The peripheral lamellar structure is closely associated with a series of vesicles which are enveloped by a double layered limiting membrane (fig. 16).

In the next or 4th stage of transition of the G body electron lucent spaces occur in the body. In the example shown in figure 17 an oval-shaped body incompletely limited by a double layered membrane shows two concentric lamellar structures of different sizes, each containing electron-lucent areas. The lamellar structures consist of dense layers about 30 Å wide arranged alternately with intervening low dense layers about 30 Å in width. The matrix is composed of homogeneously dispersed fine granules of medium density, dense inclusions, and very dense particles 50 to 70 Å in diameter which are found isolated or in clusters (fig. 17). The G body develops finally into an electron-lucent body in which remain a few particles of low and high density and a lamellar element at the periphery of the body (fig. 18).

Turnbull's blue test for organic iron compounds. The dense particles, 50 to 70 Å in diameter appearing in the D bodies and G bodies are similar to organic iron particles in density and size as described by Farrant ('54) and Bessis and

Breton-Gorius (57 '59a, '59b). The Turnbull's blue test for organic iron compounds shows a number of dark blue granules in nutritive cells in which numerous maturing spermatids appear attached to its surface. Such granules are rare in very early stages of spermatogenesis. They are different in number and size in different cells. They are characteristically found in the nutritive cell, and have never been observed in germ cells (fig. 21). The iron organic iron test was negative in both nutritive and germ cells.

Staining by Sudan III. In the preparation stained by Sudan III dark reddish granules appear at the periphery of the seminiferous tubules as Montagna and Hamilton ('51) have observed in the human testis but only a few granules are present in the nutritive cell. This suggests that D bodies and G bodies are not lipoidal. However a helical structure is found along the major axis of the maturing spermatid nucleus. This appearance suggests that there are lipides either in the cytoplasm surrounding the nucleus in a helical configuration or in the mantle which is provided with the endoplasmic reticulum in a canalicular form (fig. 22) (Yasuzumi, Tanaka and Tezuka, '60).

DISCUSSION

This report is a follow-up of earlier studies (Yasuzumi and Tanaka, '58; Yasuzumi, Tanaka, Tezuka and Nakano '59; and Yasuzumi, Tanaka and Tezuka, '60). The fine structure of the endoplasmic reticulum in the atypical spermatid and of peculiar bodies appearing in the nutritive cell have been analyzed in detail. Possible origins of these bodies will now be discussed.

In an early stage of metamorphosis of atypical spermatids, one does encounter circular profiles that can be definitely identified as elements of the rough-surfaced endoplasmic reticulum. These elements display dense granules 130 to 150 Å in diameter adhering to the external surface of their membranes. In this stage it has been noted that the cytoplasm is remarkably basophilic and contains RNA on the basis of cytochemical tests, as described previously on several cells of other animals (Schachman, Pardee and Stanier '53).

Palade and Stekevitz, '52 Chao and Schachman '56 Tso Bonner and Vinograd '56 Palade and Stekevitz, '56 Cota Robles Marr and Nilson, '58 Tissières and Watson '58 and Blondel and Turian '60) As the metamorphosis of the atypical spermatid proceeds the Palade granules disappear gradually from the surface of the vesicles and at the same time the contents of vesicles increase in density and amount. The cytoplasm loses its basophilic character and no longer shows evidence of RNA. The contents of the vesicles appear finally as dense granules of varying size and number. It has already been reported that there is a close relationship between the increase of the dense granules in the vesicles and the progressive reduction of the nucleus which at least completely loses its DNA components (Yasuzumi and Tanaka '58).

The limiting membrane of the vesicles representing the rough-surfaced endoplasmic reticulum which contain an amorphous substance appears as a single dense layer about 50 Å thick, as noted previously by Karrer ('60). As the contents of the vesicles increase in density and amount, the limiting membrane is transformed into a double layered structure i.e. Robertson's unit membrane ('57 '59) and becomes continuous with the plasma membrane which shows always the unit membrane characteristics. It is assumed that the vesicles which apparently represent a vesicular form of the smooth-surfaced endoplasmic reticulum, are connected with one another to make a continuous channel from the perinuclear space to the intercellular space. Through such a pathway the nuclear material seems to be transported from the nucleus into the intercellular space. In the present study it has been noted that the rough-surfaced endoplasmic reticulum connected with RNA-synthesis is transformed into the smooth-surfaced endoplasmic reticulum which plays an important role in transport of the nuclear material. It has already been suggested by Bennett ('56) and Porter ('56) that the endoplasmic reticulum may function as an intracellular conductor directing and facilitating intracellular movements.

Cytochemical tests have shown that the dense granules in the vesicles of the atypical spermatids are composed of a Feulgen positive material but the dense granules aggregated to form the middle piece sheath lose their basophilic character and are transformed into PAS-positive material. Such a cytochemical change is very interesting, but it is difficult to explain in the present study how the Feulgen-positive material is transformed into the PAS-positive material.

It is apparent that the D bodies appearing in the nutritive cell represent the coalescence of granular material derived from the atypical spermatid vesicles. The material had previously been discharged into the intercellular space through the channels mentioned above. It then was incorporated into the nutritive cell in the following manner: The dense granules derived from the atypical spermatids first become attached to the plasma membrane of the nutritive cell. Then minute invaginations of the membrane form, ensfold the adherent granules. These cause the coalescence of the dense material. A narrow area of defect or discontinuity of the nutritive cell membrane adjacent to the D body may possibly be evidence of adaptation serving the transfer of the material (fig. 10). Finally the invaginated membrane is pinched off forming the D body (figs. 11 and 12). This activity of the nutritive cells reminds one of the pinocytotic activity described in the amoeba by Chapman-Adresen and Holter ('35) in the lung tissue by Karrer ('58) and in the young rat glomerular epithelium by Farquhar and Palade ('60). Cytochemical tests have shown that the D body is composed of PAS-positive material. This D body corresponds to the chromatoid body described in the previous papers (Yasuzumi and Tanaka, '58 and Yasuzumi, Tanaka and Tezuka, '60).

One of the striking features in the nutritive cells is a series of G bodies from mitochondria. A few mitochondria, measuring 0.2 to 0.3 μ in diameter, are aggregated to G bodies 0.8 to 1.2 μ in diameter which are filled with an amorphous substance of medium density. As the maturation proceeds the changes occurring in the internal structure of the G bodies be-

elimination or condensation of its elements which finally are converted to an electron-lucent body leaving a lamellar structure at its periphery. The complex change in the structure of mitochondria has already been reported in several cells of other animals (Payne '52, Hess '53; Drapczy '56, Lever '56, Harford, Hamill, Pader and Revenswaay '56, De Robles and Sabatini, '58, Yasuzumi and Saphara, '58, Zelander '59, Yasuzumi, Saphara, Nakano, Kise and Takeuchi, '60; and Duncan and Hild, '60). In the present study it was fortunately possible to trace the changes of the mitochondria of the nutritive cell through the successive steps of spermatogenesis. It is very easy to differentiate the G body which originates from mitochondria, from the D body because the former is less dense than the latter.

Both D and G bodies arise from different origins, but have something in common. Both bodies often appear to contain small external structures seen as densely stopped whorled lamellae with light centers of different sizes and shapes. The diameter of these lamellae is much smaller than those of the Golgi complex. Extremely dense particles 50 to 70 A in diameter are found scattered or in clusters within the bodies. Both bodies are encountered in intimate association with the endoplasmic reticulum. These morphological features suggest that nutritive elements in the bodies could conceivably move into the mantle where they could participate in the developing activities of the typical spermatids.

The Golgi complex in the nutritive cell was not studied in detail since there seemed to be no relationship between D and G bodies and the Golgi complex which appeared only as a vesicular structure in a narrow space (fig. 7).

The very dense particles 50 to 70 A in diameter found in the G and D bodies are similar in density and size to organic iron particles as described by Farrant (74), Filade (56), Besais and Breton (57, 59a, 59b) and Farquhar and Filade (50). In the present study granules which are positive in the Turnbull's test for organic iron compounds were found only in the nutritive cell where ma-

turing spermatids appear attached to its surface. A test for inorganic iron was negative.

It was noted that the D and G bodies were not lipid since they did not stain with Sudan III. Yet it is interesting that typical maturing spermatid heads show a positive lipid reaction in a helical pattern about the head. It is not sure whether the lipid exists within the mantle or in the cytoplasm. However the lipid seems to be located in the cytoplasm forming a helix around the maturing nucleus since the lipid is rarely found in the nutritive cell from which the mantle develops. It has been revealed that the cytoplasm spiraling around the nucleus is sloughed off when the typical spermatid has reached a certain degree of maturity (Yasuzumi, Tanaka and Teruka, '60). The present study suggests that the mechanism by which the cytoplasm sloughs off the nucleus may be related to lipid degeneration of the cytoplasm.

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PLATE I

EXPLANATION OF FIGURE

- 1 Section through an early atypical spermatid of *Cipangopeludina wallensis* Reev. showing part of nucleus (N) perinuclear space (PS) and vesicles (V) which represent the rough-surfaced endoplasmic reticulum of the atypical spermatid. The karyoplasm is composed of fine granules dispersed without clear regularity of patterns, though the granules seem to be arranged in coiled strands at the points marked by the arrow. The vesicles (V) limited by single layered membrane contain amorphous substance (ABS) of low density. Dense granules 130 to 150 Å in diameter appear attached to the external surfaces of the vesicles (V) and free in the cytoplasmic matrix. X 120,000

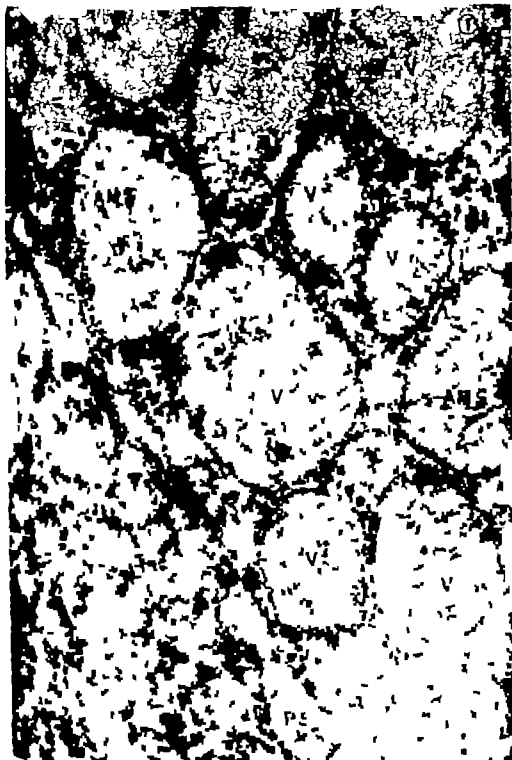


PLATE 3

EXPLANATION OF FIGURES

- 4 Two dense large granules (DG) can be seen in the intercellular space. Note that the rough-surfaced endoplasmic reticulum contains amorphous substances (AMS) and that the smooth-surfaced endoplasmic reticulum invests dense large granules (DG). The limiting membrane of one of the vesicles containing dense granules leads to the plasma membrane at the point marked by the arrow $\times 40,000$.
- 5 As the metamorphosis of the atypical spermatid proceed many of the vesicles come to contain the dense large granules. It is clearly visible that the vesicles are limited by double layered (unit) membrane (arrows) at high magnification. The plasma membrane (PM) shows also a double layered structure. The perinuclear space (PS) is visible $\times 138,000$.

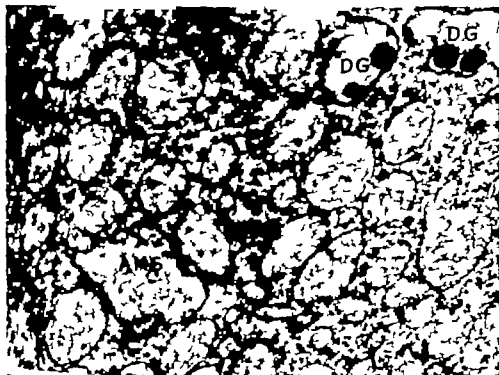


PLATE 5

EXPLANATION OF FIGURE

- 7 A longitudinal section of an atypical maturing spermatid lodged in deep indentation in the surface of nutritive cell (NC) showing an irregular outline. The atypical spermatid nucleus (N) is reduced to a thin arched profile which envelopes bundle of tail filaments (TF). The middle piece is surrounded by an envelope composed of series of vesicles filled with a dense material. The nucleus (NN) of the nutritive cell (NC) shows a flat profile. Peculiar dense bodies (DB) and globoid bodies (GB) and vesicles (V) of different sizes can be seen in the nutritive cell (NC). The Golgi zone (GZ) is composed of small vesicles and group of small vesicles surrounded by single membrane (arrow) $\times 15,200$.



PLATE 7

EXPLANATION OF FIGURE

- 10 A dense granule (DG) and amorphous substances (AMS) are found in the intercellular space between two atypical spermatids (ASP) and the nutritive cell (NC). At the periphery of the nutritive cell, an irregularly shaped D body (DB) with inhomogeneous appearance appears attached to the mitochondrion (M) and endoplasmic reticulum (ER). The plasma membrane of the nutritive cell (NC) is discontinuous at the parts marked by the white arrows. Very dense particles 50 to 70 Å in diameter are found at the periphery of the D body. The vesicles representing the smooth surfaced endoplasmic reticulum and the plasma membrane show double layered structure at the points marked by the black arrows. $\times 77,000$.

ER

ER

DB

ER

ASP

NC

AMS

DG

ASR



PLATE 9

EXPLANATION OF FIGURE

- 12 A "D" body (DB) limited by a double layered membrane (white arrows) contains laminae and dense masses of different sizes. Numerous electronlucent spaces occur in the body. Apparently each layer of the laminae is not a single unit but a double layered structure (black arrows). Fine dense particles, 50 to 70 Å in diameter, are distributed in the mass. Mitochondria (M) provided with tubules or cristae are filled with a matrix of intermediate density. The endoplasmic reticulum (ER) appears often attached to the limiting membrane of the D body (DB) and the mitochondria (M). A dense granule (DG) can be seen in the intercellular space between the mature cell (NC) and the atypical spermatid (ASP) $\times 81,000$.



PLATE 12

EXPLANATION OF FIGURE

- 15 G body (GB) appearing in the nutritive cell in high magnification depicts a cell defined double layered unit limiting membrane (white arrows) A amorphous matrix is concentrated in at least 5 places (black arrows) Dense particles are found in random distribution and in clusters in the matrix. Vesicles (V) appear loosely attached to the G body $\times 157,000$.



PLATE 13

EXPLANATION OF FIGURE

- 18 G body (GB) appearing in the nutritive cell (NC) at high magnification. It is enveloped by double layered unit membrane (white arrow). The body consists of an amorphous material and contains lamellar structures which are arranged either concentrically (CC) or in parallel (PL) at the periphery of the body. Two smaller dense inclusions (DI) of different sizes can be seen in the less dense matrix. Denser particles 50 to 70 μ in diameter either surround the homogeneously dense inclusion or are scattered in the matrix. The peripheral lamellar structure (black arrow) seems to be associated with one of series of vesicles which are enveloped by a double layered limiting unit membrane. A mitochondrion (MI) of small size is visible showing little internal organization. $\times 154,000$



PLATE 15

EXPLANATION OF FIGURES

- 19 This picture displays an ordinary light micrograph of the PAS-reaction in the sheath of the middle piece of atypical spermatids which were fixed with 1% osmium tetroxide adjusted with Veronal-acetate buffer to pH 7.3. The sheath gives a positive PAS-reaction. $\times 4000$
- 20 This picture shows an ordinary light micrograph of seminiferous tubules which were fixed in 1% osmium tetroxide adjusted with Veronal acetate buffer to pH 7.3 and stained by the PAS-reaction. Numerous granules giving positive PAS-reaction appear in the nutritive cell and in the Golgi zone (arrows) of germ cell. At the right, lower side of the figure the sheath of the middle piece of typical spermatids can be seen, being stained by the PAS-reaction. The basement membrane (BM) of the seminiferous tubule shows a positive PAS-reaction. $\times 4000$



PLATE 16

EXPLANATION OF FIGURES

- 21 An ordinary light micrograph of seminiferous tubules with maturing sperm shows granules giving positive Turnbull's blue reaction for organic iron compounds in the nutritive cell. Background counterstained by eosin. $\times 2000$.
- 22 An ordinary light micrograph of seminiferous tubules fixed in 1% osmium tetroxide adjusted with Veronal-acetate buffer to pH 7.3 and stained with Sudan III and methylene blue. It shows dark reddish granules at the periphery of the seminiferous tubules and only a few granules (black arrow) in the nutritive cell. A helical structure stained with Sudan III can be seen at the head part of the typical maturing sperm tails (white arrows). The nuclei of germ cells and the sheaths of middle pieces of typical spermata are stained by methylene blue. $\times 4000$



(Blattner and Williamson, '51; Williamson et al. '56; Robertson et al. '60) resulted in abnormalities of several embryonic organs including the lens. The high titers of influenza A and Newcastle disease viruses necessary for initiation of lens defects resulted in severe retardation or complete necrosis of the lens followed shortly by death of the embryo. However in embryos infected at the 48-hour stage by mumps virus, there was survival for 3-15 days after inoculation and the occurrence of virus-induced cataracts in many of these embryos (Williamson et al. '57).

The present report is concerned with the incidence, origin, and development of characteristic mumps-induced lens cataracts in embryos infected at various stages during the early formative phases.

MATERIALS AND METHODS

Chick embryos were inoculated at each of the following five incubation ages: 36, 48, 60, 72 and 96 hours. The number of experimental and control embryos injected in each age group is shown in table 1.

The Enders strain of mumps virus was used and was obtained from American Type Culture Collection. This virus was inoculated in 10⁻¹ dilution into the allantoic cavities of eight-day chick embryos. The infectious allantoic fluids were harvested after incubation at 35°C for seven days. The fluid was harvested from each egg separately and tested for hemagglutinating activity. Fluids showing titers of 1-500 or more were pooled and dispensed in ampoules for storage at -70°C. For

inoculation into embryos the suspensions were diluted in buffered saline (pH 7.2) to the required infectivity.

Infectivity titers were determined by inoculating 10-fold dilutions of the virus suspensions into the allantoic cavities of groups of eight-day-old embryos. These were tested after seven days for virus growth as indicated by hemagglutination of the allantoic fluids. The ID₅₀ was calculated by the method of Kärber ('31).

The eggs were from flocks of New Hampshire reds, and were incubated in a forced-draft incubator at 37°C. The embryos were prepared for inoculation by cutting a square window in the shell over the embryo. The shell membrane was then ruptured and the inoculum injected through the vitelline membrane and over the embryo. In the 96-hour group, in which the amniotic membrane covered the embryo, the inoculum was injected into the amniotic cavity. The amount of inoculum was 0.05 ml in all cases. Optimum titers of the virus to yield a high percentage of viable defective embryos after inoculation at 48 hours of incubation had been previously determined (Williamson et al. '57). Comparable titers were employed in the present study with an ID₅₀ of 10⁴ to 10⁵ per 0.05 ml of inoculum. Control embryos were inoculated with normal allantoic fluids in dilutions equal to those of the experimental groups. All embryos were staged according to the criteria of Hamburger and Hamilton ('51) at the time of inoculation.

TABLE 1

Incidence of lens cataracts observed grossly in chick embryos three or more days after inoculation in five age groups

Group	Hours of incubation at inoculation	Total eggs virus-inoculated	Range of developmental stages inoculation	Experimental embryos observed at three or more days postinoculation		
				N. number of embryos	Number with cataracts	Percentage incidence of cataracts
I	36	263(202)	8-13	72	63	85
II	48	364(292)	9-15	172	113	67
III	60	209(184)	13-18	93	20	22
IV	72	193(186)	15-20	105	0	0
V	96	182(136)	20-25	93	0	0

Incubation temperature 37°C.

In parentheses are the numbers of control eggs which were injected with non-infectious allantoic fluid. None of the control embryos developed typical cataracts seen in experimental embryos.

Hamburger-Hamilton stages.

Cataracts were not observed grossly prior to three days postinoculation.

After inoculation, the shell opening was covered with a glass cover slip and the slips sealed with paraffin. Surviving embryos were examined daily up to 14 days postinoculation, by observation through the shell opening under 24 \times magnification. Hamburger-Hamilton staging was done whenever possible, although development of the membranes obscured the view of the older embryos.

At 24-hour intervals after inoculation groups of surviving embryos were harvested and fixed in Bouin's fluid. Embryos were harvested up to seven days postinoculation in the 36-hour group up to eight days in the 48-hour and 60-hour groups up to 14 days in the 72-hour group, and up to the 16 days in the 96-hour group. At the time of fixation all embryos were examined under the dissecting microscope for gross appearance of cataracts as well as other abnormalities. Also, the developmental stage (Hamburger-Hamilton) was determined. In addition, in most of the harvested groups, five experimental and two control embryos were serially sectioned and stained for microscopic examination. Altogether, 180 experimental and 80 control embryos were sectioned. The stains used were Delafield's hematoxylin and eosin, and eosin and methylene blue.

OBSERVATIONS

Incidence of lens cataracts

The five age groups studied are listed in table 1 along with the number of virus-inoculated and control embryos as well as the range of developmental stages at inoculation in each group. The characteristic type of lens cataract induced by virus inoculation was not observed grossly in any of the control embryos nor in any of the experimental embryos prior to three days postinoculation. As described previously (Wrightson et al., '37) the cataract appears at three days after inoculation as a small and dense white opacity centrally or slightly excentrically located. As development proceeds, both the opacity and the lens become larger with the cataract maintaining its central position.

Table 1 also indicates the numbers of embryos examined grossly 3-14 days after inoculation. These numbers do not repre-

sent true survival figures since some embryos, which might have survived the virus infection, were harvested for histological study during the first two postinoculation days.

The incidence of lens cataracts detected by gross examination in embryos living three or more days after inoculation is also indicated in table 1. The incidence ranges from 88% in the youngest age group to none following inoculation in the oldest age group. It is evident from these figures that susceptibility of the lens to damage by the virus was high in the youngest embryos inoculated and that this susceptibility declined with advancing developmental age.

In table 2 the incidence of cataracts is related to the developmental stage and the status of lens morphology at the time of inoculation. There was a high incidence (ranging from 87 to 43%) in embryos inoculated prior to the time the lens vesicle closes off a low incidence when inoculated at the time of closure and no incidence when inoculated after separation of the lens vesicle from the surface ectoderm. It can be stated then that the mumps-induced defect is produced only after direct contact with lens tissue at a time when this tissue is susceptible, and that this critical period is during early formative phases, i.e. during placode pit and early vesicle stages. Following this critical period, it is apparent that the developing lens either is protected by overlying tissue which is not susceptible and therefore cannot transmit the virus or the lens tissue itself is capable of resisting viral invasion.

Cataracts occurred bilaterally in a majority of affected embryos, but in many cases were more extensive in the right lens. In subsequent histological examinations the pathological changes were often found to be more advanced in the right lens. In a few cases cataracts occurred unilaterally either in the right lens or in the left lens. These observations are in contrast to those of Langman ('60) who found that cytotoxic effects of lens antiserum were located unilaterally on the left side in 70% of the embryos tested.

In addition to the specific lens-cataract type of defect in the older embryos there was exhibited a consistent inhibition

TABLE 2

Incidence of lens cataracts observed grossly in chick embryos three or more days postinoculation — correlated with developmental stages and lens morphology at inoculation

Stages at inoculation	Lens morphology at inoculation	Number of embryos observed 2-14 days post-inoculation	Number of observed embryos with cataracts	Percentage incidence of cataracts
8-10	Surface ectoderm and optic vesicle in contact (stage 10)	53	45	87
11-13	Lens placode	133	90	74
14-16	Lens pit and early vesicle with lens pore	136	59	43
17-18	Lens pore closing and lens vesicle separating from surface ectoderm	101	0	0
19-25	Lens vesicle separated from surface ectoderm	113	0	0

Hamburger-Hamilton stages.

the growth of the amniotic membrane and also a moderate inhibition of embryonic growth in general. In other words, the embryos surviving three days or longer with cataracts were observed to be somewhat smaller than the control embryos, but not otherwise abnormal except for spraddling in some cases. It should be noted that in previous studies a few embryos inoculated at the 48-hour period and surviving for 12 to 15 days did show defects of feathering, pigmentation of the optic cup, and of lid and skin development around the eye (Williamson et al. '57).

Histogenesis of lens cataracts

Before proceeding with a description of the histogenesis of the mumps-induced cataract it should be noted that a low incidence of tissue damage in other surface ectodermal structures such as neural tissue, auditory placodes and visceral arch ectoderm was observed in histological preparations. This tissue damage was degenerative in character and was seen in embryos harvested the first and second postinoculation days. Embryos surviving three or more days rarely exhibited any specific developmental defects, other than lens cataracts in organs arising during this early period of development. It is possible that the damage observed in organs other than the lens prior to the third day repre-

sents defects which are lethal to the embryo or it may be that some embryos show toxic effects from the large doses of virus inoculated. Nevertheless the fact that mumps-induced cataracts are compatible with survival of the embryos up to at least the fifteenth postinoculation day is marked contrast to the short survival of embryos inoculated with two or more myxoviruses at titers which produce cleft organ defects (Williamson et al. '56; Robertson et al. '55, '60).

Histological examinations confirm that cataracts occurred only in embryos inoculated prior to stage 18 (i.e. prior to separation of the lens vesicle from the surface ectoderm) as indicated earlier by gross observations (table 2). However a characteristic microscopic lesion was found to be present in lenses at least 24 hours prior to the gross appearance of the lens opacity. This first indication of lens abnormality was rarely observed earlier than two days following inoculation and consisted of alterations in the cytoplasm of differentiating lens fiber cells. Figure 1 shows a lens vesicle from an embryo which had been inoculated at 48 hours, incubated, and allowed to develop for two days before fixation and subsequent preparation for microscopic study. This lens is somewhat retarded in growth but otherwise the cataract defect detectable in this type of prep-

DISCUSSION

During active phases of lens organogenesis it is evident from our experiments that differentiating lens-fiber cells are strikingly more susceptible to damage by mumps virus than are the anterior or equatorial cells. Such specific tissue manifestations of viral activity during organogenesis have been noted previously. For example in young embryos infected with Newcastle virus (Robertson et al. '55) or Influenza A virus (Robertson et al., '60) an alar-basal difference in susceptibility was noted during the process of neurulation. Subsequently in a study of proliferative patterns during neural organogenesis no correlation was found between differences in mitotic densities and viral susceptibility (Corliss and Robertson '63). It therefore seems that differences in susceptibility to viruses during organogenesis can be due to morphogenetic mechanisms other than cell proliferation. Related to this is the observation by Noyes and Mellors ('57) employing the fluorescent antibody technique that most of the papilloma virus could be found in the nuclei of the differentiated keratinizing cells in superficial regions of the papillomas in the cottontail rabbit. Subsequently Noyes ('59) demonstrated by means of microcentrifuge technique that the papilloma virus could be extracted from the keratinized layers of cells, and not from the actively proliferating cells at the base of the papillomas. Electron microscopic observations by Stone et al. ('60) indicated that the spherical virus particles, presumably representing the fully infective virus, could be found only in the differentiating and fully keratinized cells of the upper part of rabbit papillomas while finely granular viral material was found limited to the nucleoli in the cells of the deeper germinative layers. Gross ('61) has suggested that the virus of rabbit papilloma exists in two forms: an immature non-infective virus in the proliferating cell layers and the mature infective virus present in the upper keratinized part of the papilloma. A different conclusion was reached by Saxén et al. ('62) who applied polyoma virus to *in vitro* cultures of mouse kidney rudiment and found that the metanephrogenic

in the presence of numerous eosinophilic inclusions in the cytoplasm of the differentiating lens fibers. It is noteworthy that these characteristic inclusions are also present in the anterior epithelium which sometimes present in the cytoplasm of the equatorial cells, their inclusion in this region is much lower than in the differentiating lens-fiber cytoplasm. Variations in the size and shape of the inclusions are shown more clearly at higher magnification in figure 2.

In the end of the third day after inoculation there is a marked cytoplasmic vacuolization, nuclear pyknosis, and necrosis of centrally located lens fibers (fig. 3). Eosinophilic inclusions are present in the differentiating lens fibers peripheral to the area of degenerating area. The inclusions are throughout the cytoplasm but are not numerous at the anterior ends of the fibers. Also, they are present in the zone of necrosis and in the lumen along with eosinophilic bodies of various sizes and irregular shapes as well as other debris arising from cellular degeneration (fig. 6). It should be noted that the eosinophilic inclusions are rarely present in the anterior epithelium and are not numerous in the equatorial cells.

The characteristic histopathology is more extensive five days after virus inoculation (figs. 5-6). The most centrally located lens fibers are completely destroyed and the ones beginning differentiation at the periphery contain the characteristic eosinophilic inclusions. It is evident that growth and differentiation of the lens proceed while central lens fibers become progressively more extensively damaged, and the cataract becoming larger as the virus becomes larger but remaining in a central position and involving only differentiating lens fibers.

Seven days after virus inoculation the lens then are almost completely destroyed (fig. 7-8). The equatorial epithelium now is abnormal masses of cells extending into the internally. This same abnormality of cell proliferation also involves the anterior epithelium. It is noteworthy that the lens capsule remains intact, even in areas where the cataract is extensively developed (see figs. 3-8).

mesenchyme is highly susceptible whereas tubules differentiating from both the ureteric bud and metanephrogenic tissue are resistant to the cytolytic effects of the virus. This was confirmed in a later study using the fluorescent antiserum technique to locate the sites of viral replication (Vainio et al. '63a). However when the effects of vesicular stomatitis virus (VSV) were compared with those of polyoma virus an important difference was noted (Saxén et al. '63 Vainio et al., '63b). It was found that the mesenchymal condensations which represent the first detectable step in tubulogenesis resist polyoma virus but are highly susceptible to VSV and support its replication. These varying observations indicate that, as might be expected, the basis and patterns of viral susceptibility of tissues during developmental phases vary with different viruses. There are undoubtedly also variations due to the techniques used the tissues employed, and the state of development of the tissues.

Susceptibility of developing lens tissue to the pathogenic effects of mumps virus is related to the developmental stage at the time of inoculation. The lens is not affected when inoculation occurs after closure of the lens vesicle and its separation from overlying ectoderm. Similar results were obtained in experiments with other viruses (Robertson et al. '55 '60) with respect to placode organs which roll up into a vesicle or tube and detach from surface ectoderm in the course of their development. The important differences between mumps and the other viruses studied (NDV and influenza) are the survival of mumps-infected embryos for much longer periods of time and the fact that the lens cataract is the only defect observed, among organs differentiating at the time of virus inoculation which is compatible with survival for three or more days after inoculation. Whether the specific pathological changes observed in the lens are due to a particularly rich source of materials necessary for viral replication or to a high degree of susceptibility of the lens fibers to the damaging effects of the virus is not known. Although the virus is known to increase in titer in tissues of the developing

embryos the virus has not actually been demonstrated in the lens or in of the early embryos. Since there abundant extraembryonic tissues such as chorion and amnion which are readily available for viral replication, it is certain whether the specific damage is due to replication of the virus or to some other secondary effect associated with the onset of the virus. However viral antigen has been demonstrated in the epithelia cells of the skin, in the oropharynx, nasopharynx, trachea and bronchi of chick embryos inoculated at eight days incubation by Watson ('52) and it seems likely that tissues of the early embryonic stage may also be susceptible to infection by the mumps virus. Further studies are planned to see if the viral antigen can be located in specific tissues of the early embryos. The specificity of the damage for the lens fibers presents an interesting point for speculation. It was observed that the lens capsule remained intact regardless of the severity of the damage to the lens. It may be that the lens tissue, infected at the time that the lens vesicle lies open, later becomes an incubation chamber after closure of the lens vesicle and separation from the overlying ectoderm, with the lens capsule serving as a barrier to the escape of liberated virus. In this way the virus in the lens might build up to a very high titer, more rapidly than is possible in other tissues of the embryo. In considering the longer survival of mumps-infected embryos and the slower development of abnormalities when compared to the effects of influenza and Newcastle disease it is probably relevant that the mumps virus appears to have a much longer latent period and a slower growth cycle than the other viruses (Tresgan and Fong, '52).

The earliest manifestation of mumps-induced changes in lens tissue is the occurrence of prominent eosinophilic inclusions in the cytoplasm of the differentiating lens fibers. These inclusions are of various sizes and shapes, and are often surrounded by a clear zone. Similar inclusions were described by Brandt ('58) in cells of tissue cultures of the choroidallantoic membrane and the amniotic membrane of chick embryos infected with New-

cells and mumps viruses. In the case of mumps virus, Brandt used two strains and found the characteristic inclusions in tissues infected with the Enders strain, the same used in our experiments but did not find the inclusions in tissues infected with the Lown strain. In subsequent work, Koch ('61) as well as Lehto et al. ('63) found similar inclusions in mammalian cell types infected with mumps. In Koch's fluorescent antibody studies, the viral antigens were found to be more widely and evenly distributed in the cytoplasm of infected cells than were the inclusions in similar preparations. Therefore these inclusions probably do not represent concentrated virus. Brandt suggested the possibility that a major component of the inclusions is a cellular protein which is altered as a result of viral action in such a way as to permit its aggregation and shrinkage when fixed with an acid fixative.

The period of greatest susceptibility of differentiating lens fibers to the pathogenic effects of mumps coincides with the time of initial formation of lens proteins. According to Mabeel and Langman ('61) the lens-fiber protein, beta crystalline, appears at the onset of lens-fiber differentiation. At approximately the same time a continuous increase in the concentration of RNA begins in the lens-fiber cytoplasm (McKeehan, '58). It is possible that these qualitative and quantitative changes may be involved in the specific pathological changes induced in the lens by mumps virus.

SUMMARY

1. Critical inocula of the Enders strain of mumps virus were injected over the blastoderm at 36 48 60 72 and 96 hours of incubation (Hamburger Hamilton stages 8-25). Surviving embryos were harvested at daily intervals up to 14 days postinoculation.

2. Observations on gross and serially sectioned specimens revealed that, of the organs differentiating at the time of inoculation with mumps virus, the lens was the only one consistently exhibiting abnormal development. By comparison, maldevelopment in other organs or tissues was occasionally observed up to the third day

postinoculation but rarely observed in embryos surviving three or more days.

3. A high incidence of characteristic lens cataracts was observed but only in embryos which had been inoculated prior to Hamburger Hamilton stage 18 i.e., prior to separation of the lens vesicle from surface ectoderm. Cataracts did not develop in embryos inoculated after this stage of development. This indicates that the susceptible stages of lens development, under the conditions of our experiment are the placode, pit and early vesicle stages.

4. An analysis of the histopathogenesis of lens cataracts in embryos inoculated at stages 8-17 indicates that development of this abnormality occurred exclusively in differentiating lens fibers until seven days postinoculation at which time the equatorial and anterior regions also showed marked pathological changes.

5. The earliest histopathological manifestation of virus infection occurred in lens vesicles two days after inoculation and was indicated by the presence of numerous prominent eosinophilic inclusions in the cytoplasm of differentiating lens fibers and sometimes also a few such inclusions in the equatorial cells. Following this, centrally located fibers exhibited progressive cytoplasmic vacuolization nuclear pyknosis, and necrosis. Growth and differentiation of the lens proceeded peripherally while central degeneration progressed towards the periphery. The cataract thus became larger as the lens enlarged but remained in a central position.

6. It can be concluded from our observations on mumps-infected chick embryos that (1) the initiation of characteristic lens cataracts occurs in high incidence if mumps virus is inoculated over the blastoderm immediately prior to or during the early formative phases of lens development, (2) lens cataract is the only specific organ defect, among organs differentiating at the time of inoculation (3) the histopathological manifestation of viral activity is first evident in the early lens fibers and (4) the central location and progressive enlargement of the cataracts result from degenerative changes continuously occurring in the cells differentiating into lens fibers.

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PLATES

PLATE 1

EXPLANATION OF FIGURES

- 1 Section through the right lens of an embryo harvested two days after inoculation with mumps virus at 48 hours incubation. $\times 100$.
- 2 Section through the same lens as in figure 1 but at higher magnification. The prominent cytoplasmic inclinations in the lens-fiber cytoplasm are eosinophilic, and represent the first indication of mumps-induced pathological changes. $\times 500$.
- 3 Section through the right lens of an embryo harvested three days after inoculation with mumps virus at 48 hours incubation. Note the extensive destruction of lens fibers. $\times 100$.
- 4 Section through the same lens as in figure 3, but at higher magnification. Note the normal anterior and equatorial cells, and the more extensive lens-fiber degeneration in the central region. $\times 400$.

KNUCKED CATARACTS IN EMBRYOS

1. Cohn, Robert, Alice P. Williams and Russell J. Blatner

PLATE 1



2



3



4

Experimental Production of Perfect Cyclopia by Removal of the Telencephalon and Reversal of Bilateralization in Somite-stage Chicks

K. T. ROGERS

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and Department of Anatomy University of Michigan,
Ann Arbor Michigan

ABSTRACT The telencephalon was removed with iridectomy scissors in stages from 1 to 20 somites, with the vast majority of operated chicks being \pm 5 to 10 weeks. The most chance of successfully producing cyclopia appears to be at 6 to 7 somites. Twelve cyclopean embryos, with operated stages ranging from 5 to 10 somites, were produced among the first 371 operations. Subsequently 398 operations, concentrated on 8- to 10-somite embryos, proved that cyclopia is very much less apt to follow this sort of operation at these stages than at the very slightly younger stages.

Ketel sections of the cyclopean embryos were stained with modification of the Bodian pretergo stain. An oral hypophysis is usually present in these embryos, making them in this respect similar to the majority of cyclopean embryos for which this point is reported in the literature, but making them different from experimentally produced cyclopean amphibian embryos reported in the literature. The sequence of loss of extrinsic ocular muscle components and the patterns of their nerves, as the cyclopean defect becomes more severe, indicates that the reversal of bilateralization is ventralization.

Coupled with biochemical work on the chick and the more recent of the biochemical work of others on amphibians, the results allow one to suggest that experimental stimuli resulting in the cyclopean mode of development may act either on prechordal substrate or on neural tissue of telencephalon and diencephalon, or on both substrate and neural tissue, and that they may be effective over a considerable period of time, up to and including the period of actual bilateralization of the optic primordia.

Early attempts to explain cyclopia really hinged on interpretation of the fate of the eyes. Speer (1819) and Kiedl (1926) believed that cyclopia arises through more or less perfect fusion of originally separate eyes and concomitant fusions of various other paired head members. Huschke (1832) opposed this and he believed that the eyes normally fuse as a single median vesicle and that in cyclopia a developmental arrest causes the eye and forebrain to remain single. As a result of his constriction experiments on *Triton* eggs in cleavage stages Speer (1941) supported the view that the cyclopean eye arises by fusion of the parts of two eyes. From his observations on cyclopean embryos produced by $MgCl_2$ treatment, Stockard (1947) agreed with the fusion theory but reversed his stand (1948 and later papers) and argued repeatedly that the cyclopean eye forms as a result of failure of division of the optic Anlage.

The view that the prechordal substrate is all-important in directing the bilateralization of the anterior part of the head by inductive action came from the operative experiments on amphibian prechordal substrate (Adelmann, '30 '37 Alderman, '35 '38 Lehman '38) in which the precise time of application of the initial stimulus was known and from experiments in which amphibian embryos were kept in lithium solutions (Lehmann, '33 '36 '37 '38; Adelmann '34 Hall, 42) in which the effective time of action of the experimental stimulus is not known with such precision. Although a considerable body of evidence has accumulated showing that the neural tissue may be very important in its own right in the events of head bilateralization, some workers have overlooked this evidence and continue to hold

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that the prechordal substrate is solely responsible (Kawakami, '55 Giroud, Delmas and Martinet, '63)

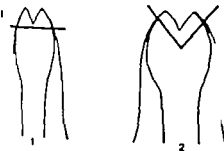
Since the telencephalon is usually strongly reduced in cyclopla it was felt in the present work that removal of the telencephalon at the time the optic vesicles are bilateralizing might result in reversal of bilateralization or fusion of optic vesicles to form a single median eye. St. Warynski and Fol (1883) first reported an experiment designed to test the possibility of reversal of bilateralization of optic primordia to form the cyclopean eye. They destroyed the anterior tip of the medullary plate of 24-hour chicks with a hot needle, but were not able to produce cyclopla. Levy ('05) in a series of experiments on regulation in *Triton taeniatum* obtained one synophthalmic individual after removal of part of the forming optic vesicles and diencephalon, along with all of the telencephalon. Pasquini ('27) obtained one synophthalmic individual by fusion and regulation after implanting most of an extra optic vesicle in *Pleurodeles waltli*. Wolff ('34) produced cyclopla perfecta by point x-raying the region of the head process in 18- to 22 hour chicks but he was unable to obtain cyclopla perfecta either by x ray or by electrocautery treatment after the eye primordia had formed. Huber (48) again failed to produce cyclopla perfecta by electrocautery but reported "la pseudocyclople" (displacement of the two eyes). It seemed significant that in the work on the chick the methods employed produce changes in adjacent tissues that are probably unfavorable for regeneration and fusion of like tissues and that eye fusions of other sorts have been accomplished by utilizing a cutting tool that leaves a clean wound surface (Born 1897 Pasquini '27 Detwiler '29 and others). In the present work, therefore, iridectomy scissors were employed for tissue removal.

The primary results of the present study were reported in abstract some years ago (Rogers '51). At that time the viewpoint that the neural tissue is important in determining head organization was not accepted. Additional operations were subsequently done to add data on the question

of the developmental time during which cyclopla can most easily be caused by this sort of operation. Further biochemical studies on the chick over the last 4 years have demonstrated that LiCl can produce perfect cyclopla in this animal (Rogers '63). Furthermore they have shown that LiCl inhibits protein synthesis and probably RNA synthesis more in neural tissue particularly the forming optic vesicles of early somite stages than in prechordal substrate (Rogers '64). These results collectively support the view point that the neural tissue is indeed important in the modification of head organization that follows LiCl treatment. Evidence in the same direction had also been accumulated from several different kinds of experiments with amphibian material (Lallier '52, '53 Lombard, '52 Masui, '56, '59 '60 '61 and Ogi, '61) as summarized in Rogers '64). It seems appropriate to report now in detail the operative results on the chick that indicate that modification of the neural tissue can be just as important as modification of the prechordal substrate in the disturbance of normal head bilateralization in the course of development.

MATERIALS AND METHODS

About 270 Barred Rock, 225 White Rock, 175 White Leghorn, and smaller numbers of Barred Rock \times Rhode Island Red, New Hampshire and Indian River and White Rock \times Cornish δ eggs were used. Eggs were incubated at 38.5 C for 28 to 51 hours before operation. A shell window about 9 mm square was cut with a hack saw blade on which the teeth had been ground to a narrow edge. The vitelline membrane was torn and lifted away from the head of the embryo with no. 5 watchmakers forceps. The operation was then performed with sharpened iridectomy scissors. Various means to position the head were tried such as the use of forceps, glass needles and hair loops but the best results were obtained with the scissors alone. A single cut, straight across removed the telencephalic area, or two cuts meeting in a V removed the telencephalic area and some of the medial di-



Figures 1 and 2

cephalic area, as illustrated in figures 1 and 2. The straight cut was employed for most of the embryos of 1 to 7 somites, and for two cuts, for most of those of 8 to 20 somites.

The first 271 operations were done on embryos of 1 to 20 somites with the great majority being at 5- to 10-somite stages. An attempt was made over the next 116 operations to select as many 10-somite embryos as possible by incubation time alone. As might be expected this method was only partially successful. For the last 32 operations, therefore, shell windows were opened but sealed after observation of the embryo if it has not yet reached 10 somites, to be reopened for operation at the indicated time. With this method all the embryos were operated upon at stages from 9 to 13 somites with the great majority at 10 somites.

After the operation, shell windows were sealed with paraffin and eggs incubated in water. Daily candling was employed to detect when embryos died, and in some cases eggs were then reopened soon enough for the embryos were useful for histological preparations. Eggs were incubated for a total of 4 to 9 days, the majority for 7 days. Of the 204 embryos that were alive at the end of the incubation period, most had been incubated for seven days.

Selected embryos were fixed in Allen's 7% modification of Bouin's fluid, sectioned at 10 μ , and stained with the modification of the Bodian stain previously described (Rogers '32). From the first 271 operations, 23 embryos were sectioned and stained. Other embryos were fixed and stained for assessment of their morphology, but were not sectioned when it appeared that they were not cyclopean.

RESULTS

Among the first 271 operations 12 embryos were produced that would be classed as cyclopean if they occurred in the human (table 1). Of these the first six listed in the table are perfect cyclopean. In addition to the embryos listed in the table a series of morphological stages in intermediate between the normal embryo and the perfect cyclopean condition were also obtained and sectioned. Four of these, illustrating typical stages in reduction of bilaterality will be presented along with a well-developed cyclopean embryo and an additional cyclopean embryo illustrating still further reduction in bilaterality. Descriptive notes as complete as those to be presented for the first embryo below were recorded from slide study for a normal 7 day embryo and for 18 experimental embryos. A complete description of the best-developed cyclopean embryo will be reported followed by descriptions that note only the significant differences from case to case for a series of five additional embryos that demonstrate the steps involved in increasing union of primordia in cyclopia and in increasing ventralization of head organization.

Because of the frequent complete absence of the telencephalon and because of the normal recurved position of the diencephalon in relation to the rhombencephalon, it would lead to confusion to attempt to describe nearby structures in a spatial framework related to the flexed brain axis. Therefore a descriptive axis has been used that is related solely to that of the hind brain in the region of the eye muscles and their nerves. To illustrate, anterior and dorsal have been indicated in figure 9. To avoid conflict, the tip roof and floor of the diencephalon are referred to rather than its anterior dorsal, and ventral aspects.

Embryo no 201 (figs 8-11 15-17 21). Operated upon at 6 somites 35 hours of incubation. A transverse cut was made across the anterior edges of the forming optic vesicles. When the egg was reopened seven and one-fourth days after the start of incubation, the embryo was alive and moving normally was covered by a normal amnion and was supplied by normal extra-embryonic vessels. The eye was

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Since the telencephalon is usually strongly reduced in cyclopa it was felt in the present work that removal of the telencephalon at the time the optic vesicles are bilateralizing might result in reversal of bilateralization or fusion of optic vesicles to form a single median eye. St. Warynski and Fol (1883) first reported an experiment designed to test the possibility of reversal of bilateralization of optic primordia to form the cyclopean eye. They destroyed the anterior tip of the medullary plate of 24-hour chicks with a hot needle but were not able to produce cyclopa. Levy ('05) in a series of experiments on regulation in *Triton taeniatus* obtained one synophthalmic individual after removal of part of the forming optic vesicles and diencephalon along with all of the telencephalon. Pasquini ('27) obtained one synophthalmic individual by fusion and regulation after implanting most of an extra optic vesicle in *Pleurodeles waltlii*. Wolff ('34) produced cyclopa perfecta by point x raying the region of the head process in 18- to 22-hour chicks but he was unable to obtain cyclopa perfecta either by x-ray or by electrocautery treatment after the eye primordia had formed. Huber ('48) again failed to produce cyclopa perfecta by electrocautery but reported "a pseudo-cyclopa" (displacement of the two eyes). It seemed significant that in the work on the chick the methods employed produce changes in adjacent tissues that are probably unfavorable for regeneration and fusion of like tissues and that eye fusions of other sorts have been accomplished by utilizing a cutting tool that leaves a clean wound surface (Born 1897 Pasquini, '27 Detwiler '29 and others). In the present work, therefore, iridectomy scissors were employed for tissue removal.

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MATERIALS AND METHODS

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After the operation, shell windows were sealed with paraffin and eggs incubated further. Daily candling was employed to know when embryos died, and in some cases eggs were then reopened soon enough for the embryos were useful for histological preparations. Eggs were incubated for a total of 4 to 9 days, the majority for 7 days. Of the 204 embryos that were alive at the end of the incubation period, most had been incubated for seven days.

Fixed embryos were fixed in Allen's 1% notification of Bouin's fluid, sectioned at 10 μ , and stained with the modification of the Bodian stain previously described (Rogers, '32). From the first 271 embryos, 23 embryos were sectioned and fixed. Other embryos were fixed and used for assessment of their morphology, but were not sectioned when it was found that they were not cyclopean.

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Embryo no 261 (figs. 8-11 15-17 21). Operated upon at 6 somites 35 hours of incubation. A transverse cut was made across the anterior edges of the forming optic vesicles. When the egg was reopened seven and one-fourth days after the start of incubation, the embryo was alive and moving normally was covered by a normal amnion, and was supplied by normal extra-embryonic vessels. The eye was the

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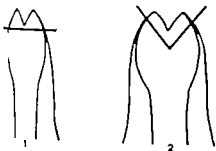
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Figures 1 and 2

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Embryo no 261 (figs 8-11 15-17 21). Operated upon at 8 somites 35 hours of incubation. A transverse cut was made across the anterior edges of the forming optic vesicles. When the egg was reopened seven and one-fourth days after the start of incubation the embryo was alive and moving normally was covered by a normal amnion and was supplied by normal extra-embryonic vessels. The eye was mo-

phalic area, as illustrated in figures 1 and 2. The straight cut was employed for most of the embryos of 1 to 7 somites, and the V cut, for most of those of 8 to 20 somites.

The first 271 operations were done on embryos of 1 to 20 somites, with the great majority being at 5- to 10-somite stages. An attempt was made over the next 116 operations to select as many 10-somite embryos as possible by incubation time alone. As might be expected, this method was only partially successful. For the last 42 operations, therefore, shell windows were opened but sealed after observation of the embryo if it has not yet reached 10 somites, to be reopened for operation at a indicated time. With this method all 22 embryos were operated upon at stages from 9 to 13 somites, with the great majority at 10 somites.

After the operation, shell windows were sealed with paraffin and eggs incubated aseptically. Daily candling was employed to test when embryos died, and in some cases eggs were then reopened soon enough to see the embryos were useful for histological preparations. Eggs were incubated for a total of 4 to 9 days, the majority for 7 days. Of the 204 embryos that were alive at the end of the incubation period, most had been incubated for seven days.

Selected embryos were fixed in Allen's 74% modification of Bouin's fluid, sectioned at 10 μ , and stained with the modification of the Bodian stain previously described (Rogers '52). From the first 271 operations 33 embryos were sectioned and 22 of these embryos were fixed and used for assessment of their morphology. 13 more, but were not sectioned when it was found that they were not cyclopean.

TABLE 1
Cyclopean embryos from the first 271 operations

Embryo number	Serial stage operated	Type of cut	Total length, days	State of embryo	Oral hypophysis	Eye
43	7	transverse	5	dead a short time	present	single pigmented vesicle
83	9 or 10	V-wedge	5½	alive	—	single retinal cup and lens
261	6	transverse	7¼	alive	present	large median eye and lens
268	5	transverse	7¼	dead	present	single pigmented vesicle
268	6 or 7	transverse	7¼	dead	absent	single pigmented vesicle
269	6 or 7	transverse	7¼	alive	present	single pigmented vesicle
28	4 or 5	transverse	5	alive	—	single retinal cup, single lens with two centers
47	8 or 9	transverse	5¼	alive	—	double retinal cup, each part with a lens
171	5 or 6	transverse	7	alive	present	single orbit, pigment on right
183	8	shallow V-wedge	7	dead a short time	present	single orbit, pigment on each side of midline
191	7	V-wedge	7	alive	absent	single orbit, pigment on right
246	8	V-wedge	7¼	alive	present	single orbit, pigmented vesicle on each side of midline

dian, of about normal size and showed a clear median choroid fissure in the fresh state. The telencephalon was greatly reduced. See figures 8-11.

Sections show that the eye is bilaterally organized, with a median, frontal lens slightly larger and more spherical than the normal lens and of normal histological form. The choroid fissure extends from the medio-posterior edge of the pupil back around the curvature of the eye dorso-anteriorly through 31% of the sections of the eye (figs. 15 and 16). Tapetum, sensory retina (with a fair number of mitoses in the stratum germinativum) the abundance distribution, and form of the nerve fibers just under the internal limiting membrane and the forming scleral condensations and corneal regions are all normal for the age. Ciliary folds are developing in a normal course (fig. 15) but have passed slightly beyond the stage seen in the control. The form of the eye is unusual only

in the presence of lateral infoldings of the wall on each side, ventro-posteriorly in the region of the lens. The two major folds are symmetrically placed; one of these is shown on the embryo's right in figure 11 while its counterpart on the left appears three sections farther down in the series. The eye is attached to the diencephalon at the dorso-anterior end of the choroid fissure. A normal optic nerve papilla is lacking, and it is difficult to be sure whether this tissue should be interpreted as optic stalk or as diencephalon proper. Relations make it seem however that the stalk has not formed and that the diencephalon is interposed between the two sides of the tapetum at this level as it is in higher sections.

Thick bundles of optic fibers from the two sides of the retina run into this diencephalic tissue and many of them certainly decussate there (fig. 17). The abundance of these fibers the small size of the tissue

as into which they run, and the fact that not of them do not continue farther makes it impossible to follow decussating fibers clearly to the opposite side of the diencephalon in higher sections. Upward in the series of sections the diencephalon takes out into easily recognizable form, with the infundibulum appearing in normal relation behind the optic chiasma. A normal infundibulum of almost precisely normal size is present, with its cavity confluent with that of infundibulum, and by way of the latter with the cavity of the diencephalon. Surrounding the saccus in lobed form is the tip of the hypophysis which shows completely normal form and sclerotic constitution, and which is attached to the roof of the oral cavity by a slender tube (for terminology see Hamilton, '32, pp. 310-311). Still higher in the sections, the diencephalic cavity is enclosed between the diencephalic tissue and the sensory retina. It can be seen in figure 11 that the diencephalic cavity is still continuous with the much reduced primary optic cavity and that the tapetum of the eye is a direct continuation from the diencephalic tissue on each side. Above and behind the eye the diencephalon is more massive, as in the control, and a normal epiphysis is attached to its roof (fig. 8). In front of the epiphysis is a median telencephalon, greatly reduced in size with walls of 4 or 5 cells thickness in most places. Distally from its attachment to the diencephalon the telencephalic vesicle is displaced slightly to the left by the eye which bulges up anteriorly somewhat farther on the right than on the left (figs. 8 and 9). The metencephalon is normal, as is the remainder of the body posterior to it.

There remains to be described the relations of the ocular eye muscles and their associated cranial nerves. (For detailed description of the development of the eye muscles of the chick see Robinson, '37 and for their nerves, Carpenter '38.) In the normal 7-day chick the eye muscles, except for the extreme insertion ends of few of them, lie in the area between the eyes, the greatest diameter of the eyes considered. In the cyclopic condition the muscles have to be formed anteriorly to the eye, or behind the eye or be decussated. With this in mind, the relations of the muscles to the eye in this series of embryos can be described by comparing their positions with those of the control embryo.

In the sections of no. 261 the superior oblique muscles are encountered first, lying lateral to the

eye one on each side, with the greatest bulk of the muscle about one-third of the way back from the ventral surface of the eye. The superior oblique is supplied by N. IV in normal fashion except that the muscle and its nerve are lateral to the eye. The superior rectus in a comparably sectioned control is seen in cross-section, beginning at its insertion, dorso-medial to the eye. In this embryo it sweeps ventrally and laterally around the eye, nearly in the plane of section, to meet the insertion of the superior oblique just dorsal to the greatest diameter of the eye. In other words, its long axis has been shifted greatly toward that expected for the lateral rectus. The quadratus is between the origin of the superior rectus and the eye on each side just as it is in the control, but in the cyclopic condition this means that the quadratus is medial to the superior rectus rather than lateral to it as in the normal chick.

The ophthalmic branch of N. V. passes peripherally from the trigeminal ganglion between the superior rectus and the quadratus, as in the control, but here, because of the reversed relations of these two muscles, the nerve passes medially to the superior rectus in the most lateral portion of the substance of the quadratus instead of laterally to the rectus in the most medial part of the quadratus. A communicating ramus to the ventral tip of the ciliary ganglion to join N. III is sent through the substance of the quadratus, as in the control. Just ventral (peripheral) to this, unlike the control, the ophthalmicus of each side has a small ovoid mass of ganglion cells on it (see Rogers, '37a, for description of ganglion cells on the eye muscle nerves of the normal chick) and then the nerve passes around the eye laterally in a course otherwise similar to the medial path of the control nerve. It follows the direction of N. IV but is lower down in the sections until it reaches well out toward the ventral part of the eye, when it ascends in the sections to end near the superior oblique muscle, as does the normal ophthalmicus at this stage.

The lateral rectus of each side is in the expected position below and slightly lateral to the superior rectus, but it sweeps forward around the eye only about half as far as does the superior rectus. As in the control, N. VI supplies the quadratus and pyramidalis muscles near their junction and just lateral to the ciliary ganglion, and then sends a large trunk to enter the lateral rectus on its ocular surface. At this forking of N. VI, unlike the control, there is a small communicating ramus between the fork and the dorso-lateral corner of the ciliary ganglion on each side. At the same section level the ciliary ganglion, on the left only branches into two masses downward in the sections. One is located at the level of the dorsal part of the ciliary ganglion of the right side, but the other is more ventral, or just lateral to the optic-diencephalic junction. It is from the ventral fork that the major ciliary nerve to the orbit arises on the left side. In sections just above the dorso-anterior end of the choroid fissure the ciliary ganglia are (abnormally) connected with each other across the midline by a few fibers dorsal to the eye. At this level the origin of the paired inferior

recti—medial recti masses are first seen just medial to the ciliary ganglia, one on each side of the midline. Also at this level it is apparent that after passing through few sections of thinned-out muscle, indicating the beginning in development of the separation of quadratus and pyramidalis, the denser tissue of the pyramidalis has been reached. The latter with its main mass just lateral to the ciliary ganglion, passes an attenuated arm of muscle medially under the fork of the ciliary ganglion on the left, and in the corresponding angle of the ganglion and its ciliary orbital branch on the right, thence toward the midline just below the area of attachment of the eye to the diencephalon, but not meeting in the midline. The relation of the pyramidalis to the ciliary ganglion and this orbital branch and to the optic stalk is exactly the same as the control, even through the changed relations in this cyclopesian head cause the projection of the muscle to be in a medial direction instead of ventral as in the control.

At the posterior ends of the ciliary ganglia (dorsal fork on the left) the nerve trunks leaving the ganglia once supply the origin of the inferior recti on their faces away from the eye (as is the case at the ventral ends of the ganglia in the control). The medial recti are apparently not separated off or at best are represented on the left only by a small slip of muscle lying ventral and slightly medial to the main mass of that side. The nerve trunks, after supplying the inferior recti (mainly with motor fibers passing through the ganglia) instead of branching as they normally do to medial rectus and inferior oblique of each side pass to the midline where the right and left trunks unite just dorsal to the inferior recti—medial recti masses, and then as a unified group of nerve fibers follow the muscle masses downward. These muscles fuse with each other to the midline toward their insertions after flanking the choroid fissure and following down through the sections (the inferior rectus of the control follows down along the choroid fissure from the region of the papilla). At the fused insertion of the inferior recti—medial recti masses then out in going down through the sections the completely fused inferior obliques appear nearly in their place but very slight farther away from the eye (insertion of inferior recti and inferior obliques meet in the control). The fused trunk of N III which came down through the sections just dorsal to the inferior recti—medial recti masses, ends by branching into the fused inferior oblique mass on its ocular surface.

Embryo no 228 (fig. 6). Operated upon at 11 or 12 somites 36 hours of incubation. A deep wedge of tissue was removed with two cuts. The embryo was alive and enclosed in an amnion after six and one-half days of total incubation. The eyes appear nearly adjacent but otherwise normal in size and form with a choroid fissure in each. The cerebral hemispheres

are much reduced. Infundibulum and hypophysis are normal, but there is no epiphysis. The right eye has a normal papilla where nerve fibers leave the eye and pass through a short, broad stalk into the encephalic wall. On the left a flattened papilla is present, around which fibers leave the vitreal surface of the ganglion cell layer and proceed to the outside of the eye but there is no stalk at this point, as fibers do not leave the eye. At some distance from this, a tiny cord of stalk cells touches the pigment epithelium from the outside and sensory retina fuses to the pigment epithelium from the inside in a small area. Tapetum and sensory retina are separate between this point and the formed papilla region. The stalk thickens and joins the diencephalon but it contains no nerve fibers.

The eye muscles and their innervation are unusual in only a few respects. The medial rectus of the left especially is shortened, and it does project out between the eyes as far from its origin as the normal. The inferior obliques are fused their origin in the midline but they separate toward their insertions. The branches of N III on each side enter the muscles independently, each other lateral to the fusion of the axons in the midline.

Embryo no 216 Operated upon at 11 somites thirty-four and one-half hours incubation. A deep wedge was removed. The embryo was alive and contained in well-formed amnion at six and one-half days of total incubation. The eyes were nearly adjacent and each had a choroid fissure as in the previous case. Maxillary processes had grown down posteriorly, the eyes and were not directed so as to push against them from their lateral faces. Sections show that the telencephalon is nearly or completely lacking. The infundibulum and hypophysis are normal but the epiphysis is absent. Retinas and lenses are normal as is the papilla region of the left eye with nerve fibers passing out of the eye through a very short stalk and crowd in the floor of the diencephalon. The right eye has no stalk, but over a very small area its pigment epithelium is continued, a reflection of the diencephalic wall, with its sensory retina projecting into the diencephalic cavity (see fig. 19 a section of embryo no 197 for an exactly similar relationship but one of greater extent).

men the surfaces of the diencephalon (eye). In place of the normal stalk, the sensory retina becomes continuous with the diencephalic tissue at another end (similar to fig. 14, embryo no. 197) where fibers cross from the retina into diencephalic tissue.

In advance over the previous case in the point of moving the eye muscles out from between the eyes is seen. The inferior rectus on the right only (side of closest association of eyes to diencephalon) is displaced very slightly laterally around the eye. The medial rectus of the left eye is near the inferior rectus and does not extend between the eyes farther than the eye stalk. The medial rectus of the right eye seems to be present, but it is reduced and only adjacent to the inferior rectus of that side. The inferior obliques are fused at their ends in the midline; the branches of N. III of the two sides enter them separately. In this case, while the preexisting, superior muscles are involved, the right superior rectus is more lateral than normal, as are both superior obliques. The left superior oblique is displaced farther than the right, but neither extends back into the narrow strip of tissue between the eyes. The right eye is placed directly over the eye rather than between it and the diencephalon, and the right ophthalmic nerve has been diverted corresponding distance upward.

Embryo no. 197 (figs. 14 and 19). Operated upon at 11 somites, thirty-six and one-half hours of incubation. A wedge of tissue was removed. At seven days the embryo was alive and enclosed in an amnion. The eyes are of normal size and very nearly touch each other. The left maxillary process had grown down around the posterior curvature of the eye and then straight again to the midline. On the right side, however, the process had grown only a short distance along the postero-lateral curvature of the eye and it falls short of the midline leaving a gap between the right eye and the oral cavity. The choroid fissure of this eye extends far to the edge of this gap. Sections show that the telencephalic vesicle is of normal size, thick-walled, and of moderate size. Infundibulum and hypophysis are normal, but the epiphysis is lacking. In both eyes the lens and retina are normal. Optic fibers from the left eye enter the diencephalic floor by way of a well formed optic stalk in normal fashion but they extend along the outer edge of the telencephalic diencephalic wall instead of passing. They can be traced most of

the way to the mesencephalon. The right eye has no stalk, but instead is related to the diencephalon in the manner described in the preceding case but over a much greater area (fig. 19). The unpigmented medial area of this eye, which could be seen in the living embryo is the area within the circumferential reflection of the tapetum from the edges of the diencephalic defect. Where sensory retina is continuous with diencephalic tissue (fig. 14) in effect a flattened papilla has formed. Here the optic fibers leave the ganglion layer in large numbers and many of them simply run out into the adjacent mesenchyme in ten or more large bundles and very shortly end there.

With the positional relationships of the left eye fairly normal, its eye muscles and associated cranial nerves are in normal relations. On the right they are so similar to those on the right in the preceding case that they do not require separate description. The major difference is that, since the muscles of the left are in normal relations, the inferior oblique of the right does not meet its opposite in the midline.

Embryo no. 198 (fig. 20). Operated upon at 9 or 10 somites, 37 hours of incubation. The embryo appeared to be alive when candled after five and one-half days of incubation but was dead when fixed at six days. There was no amnion. The eyes were of normal size, and adjacent to each other. The right eye appeared normal. The left eye however lacked a choroid fissure and there was a transparent (unpigmented) vesicular bulge of its coats ventrally. Through this window one could look in through the eye into the third ventricle of the brain. A large blood vessel passed around the exterior of the eye to ring the pupil.

In section (fig. 20) the sensory retina of each eye is seen to project into the diencephalic cavity. The pigment epithelium is reflected from the diencephalon on each side but it has broken away as a result of tensions of growth or fixation, over a dorsal area on the left and a very small dorsal area on the right. Nerve fibers from the right eye pass into the diencephalon along the medial edge of the choroid fissure where the sensory retina is continuous with the diencephalon. Nerve fibers in the left eye which possesses no such connection with the diencephalon, do

not leave the vitreal surface of the retina. The telencephalon is apparently represented only by a small, irregular pocket from the diencephalon. The mesencephalic wall is thin and abnormally convoluted over the caudal five-eighths of the left side. The hindbrain is abnormally thick walled and thick roofed in places. Infundibulum and hypophysis are present, but there is no epiphysis.

It is apparent that the eye muscles must have moved out from between the eyes to a great degree. In development, the medial recti seem not to have separated from the inferior recti, as was true in the perfect cyclopean embryo no. 261. Inferior obliques are represented by loose interlacing strands of muscle few in number and crossing the midline in a few instances. The superior rectus of the left side has deviated from its normal course, and come to lie on a plane nearly parallel to the lateral rectus instead of lying at nearly a right angle to it (compare no. 261). The superior obliques are so poorly developed that it is difficult to outline the muscle masses, although N. IV proceeds out to the expected area between the eyes ventro-anteriorly.

The preceding four embryos illustrate morphological stages between the normal control embryo and the well-developed cyclopean embryo. The following embryo illustrates reduction of the cyclopean eye and further reduction in bilateralization of the head over that described for cyclopean embryo no. 261.

Embryo no. 269 (fig. 18). Operated upon at 6 or 7 somites 36 hours of incubation with a transverse cut. After seven and one-fourth days of total incubation the embryo was alive and enclosed in an amnion. Sections show a single orbit with a pigmented vesicle in its center but the ventral part of the head is bent slightly to the left so that reference to the hindbrain axis would appear to put the eye a little to the left of the midline. Study of the shape of the head and orbit, and of the cranial nerves and eye muscles however shows that the eye is truly an example of perfect cyclopia. The telencephalon is absent and the diencephalon has unusually thick walls. An epiphysis infundibulum and hypophysis are present. The optic vesicle is composed of pigmented cells, and there is no lens. The stalk of the vesicle attaches to the dorsal wall of the vesicle to the right of its center and dorso-anteriorly to the tip of the diencephalon just to the left of its midline.

The more ventral oculomotor muscles are fused and massed near the midline to a degree seen in any of the cases so far described. A heavy mass of muscle ventro-medial to the ciliary ganglia represents the unseparated inferior recti—medial recti complex and the inferior oblique of the two sides are fused in the midline. Ciliary ganglia, located dorsal to the eye, are heavily cross-connected by fibers supplying the masses. The right and left ciliary nerves pass the right and left dorsal aspects of the pigmented optic vesicle (fig. 18) and there branch out to the eye to form a common, encircling net of nerves. The superior obliques are fused in midline. Superior and lateral recti are bilaterally separated from their counterparts, but the lateral rectus, quadratus, and pyramidalis of each side form an undivided mass of muscle that laterally closely adjacent to the fused complex of inferior and medial recti noted above.

Supporting cases of cyclopia

In a general way the group of embryos comprising nos. 43 (fig. 4 total view) 26 and 268 resemble no. 269 which has just been described. All have a single, media pigmented optic vesicle. The eye is perfect cyclopean but not well developed. In each case the lens is lacking.

Embryo no. 28 (fig. 3 total view and fig. 12, section) is representative of group including also nos. 47 (fig. 13, section) and 83. The general development of body form is poor; eyes have not developed a pigment epithelium but the optic vesicle has invaginated in each case, and a lens or lenses are present. Embryo no. 28 was operated upon at 4 or 5 somites 33 hours of incubation, with a transverse cut. After five days of total incubation the embryo was alive but spread out ventro-side down on the yolk. The ectamnion has just begun to rise around the embryo. The heart although pulsating, had failed to unite into a single tube in the midline. In sections the eye is seen to be attached to the anterior tip of the neural tube. A single retinal cup of irregular shape surrounds the lens with two distinct lens centers. The outer wall of the eye is continuous with that of the brain; no optic stalk has formed. This eye is not considered to be an example of cyclopia perfecta because of the partly double lens. No. 47 has a partly double optic cup with two lenses where no. 83 has a single optic cup and a single lens.

Embryos no. 191 (fig. 5 total view) and no. 171 are similar in that both have

right median orbit, but a pigmented stalk of small vesicle in the right side of the embryo No. 191 was operated upon at 7 somites, 35 hours of incubation. A large anterior wedge of tissue was re-

The embryo was living after seven incubation, and the amnion well formed. Maxillary processes had developed posterior to a single, wide, low-triangular orbit centered in the midline. The rounded, vesicular eye in the right side of the orbit is connected to the brain by a long pigmented stalk, clearly seen in figure 5. Sections show that the telencephalon is lacking, the diencephalon is abnormal in form, and the mes-

encephalon has developed only a hint of the normal bilaterality of optic lobes. The telencephalon is very irregular indented, pigmented vesicle. Maxillary and epiphysals are lacking. The more ventral oculomotor muscles of each side are fused and massed in the midline. The ciliary ganglia supply these muscles and only the ganglion on the right sends a large nerve trunk out to enclose the optic vesicle. Superior oblique muscles are fused in the midline but the superior and lateral recti are both bilaterally paired.

Embryos no. 246 (fig. 7 total view) and no. 183 both have a single median orbit with two small pigmented vesicles and section No. 246 was operated upon at 8 somites, 36 hours of incubation, with an anterior wedge removed. The embryo was living after seven and one-half days of total incubation. Sections show that the telencephalon is nearly or completely lacking, the epiphysals absent, but the infundibulum and epiphysals well developed. The eyes are pigmented vesicles, heavily infolded in various places, but especially on the side toward the ventral surface of the head. The optic stalks extend back to the diencephalon. A small lens is present in front of the eye on the left only. The ciliary ganglia, located dorso-medial to the eye on each side, send their orbital branches to the sensory ganglion located immediately dorsal to each eye. The eye muscles are very similar to those of no. 191 just described, except that the inferior recti — ocular recti complexes of the two sides are

fused in the midline ventro-medial to the ciliary ganglia.

The eight embryos from the first 271 operations included in table 1 that were still alive at the end of the incubation period comprise just over one-tenth of all the embryos that were alive at the time the eggs were opened.

Results of further operations

Since no new types of embryos appeared among the operations after the first 271 histological sections were not made of any of these later embryos. Although in the next group of 116 operations an attempt was made to operate on embryos of 10 somites this attempt, as stated in the methods section, was only partially successful. One embryo no. 289 operated upon at 5 somites died just after six days of total incubation. It had a single, laterally elongated orbit, symmetrically enclosing a laterally elongated, pigmented vesicle lying across the midline and centered upon it. It constitutes an additional case of cyclopia perfecta.

In the last group of 282 operations most of the embryos were operated upon at the 10-somite stage. Among these were 13 embryos of especial interest, two of which developed for a total time of six days, ten of which developed for seven days, and one for nine days. One was operated upon at 9 somites, four at 9 to 10 somites, and eight at 10 somites. One of these had eyes similar to no. 228 (fig. 6 total view and described above) but the eyes were not quite as close together as those of no. 228. Four embryos had eyes similar in position to those of no. 228 and seven had eyes still closer together thus resembling more closely nos. 216 197 (figs. 14 and 19 sections) and 198 (fig. 20 section) all of which were described above. Several of the group of seven were dissected in the fresh state with iridectomy scissors, demonstrating that the pigment layer and in some cases even the sensory retina were absent from one or both eyes in the common, medial area of junction. The thirteenth embryo had a large single orbit with a reduced, pigmented vesicle on each side of the midline thus resembling no. 246 (fig. 7 and described above).

DISCUSSION

These experiments demonstrate that it is possible to produce cyclopia in early somite stages by a disturbance initially limited almost entirely to neural tissue more specifically that at stages of 5 to 7 somites cyclopia perfecta can be produced by removal of only the telencephalon and its lateral, covering surface ectoderm. No prechordal substrate is removed in an operation employing a transverse cut just anterior to the forming optic vesicles at these stages as can be seen from serial sections of normal embryos. At stages of 8 to 10 somites it becomes increasingly difficult to produce cyclopia and more success is attained by removal of a wedge of tissue with two cuts, directed so as to include the telencephalon and the medial portion of the diencephalon between the forming optic vesicles in which the anterior portion of the medial prechordal substrate is also removed. Clarke ('34) has shown that in the chick the eye forming field is still strongest medially up to the stage of 8 somites but after that time there is a medial area that will not form eye if isolated in chorioallantoic grafts. At 5 to 7 somites the optic vesicles are beginning to bilateralize as can be seen in both the intact embryo and in sections. The production of cyclopia at this time can be interpreted as a reversal of the normal course of events in the bilateralization of the head. Since the transverse cut is most successful at this time the reversal can be ascribed to neural deficiency.

The cyclopean eye still behaves at least in part as a product of bilateralized development retaining certain properties of the derivatives of the normal right and left optic fields. In particular it tends still to send its optic fibers to the opposite side of the brain. It was not possible to trace these fibers past the chiasma region in embryo no. 261 of the present series but amphibian embryos determined to cyclopia by centrifugation (Pasquini '42) and teleost fish embryos determined to cyclopia by chemical means (Rogers '52, '57b) usually have optic fibers from the right side of the cyclopean eye crossing to the left side of the diencephalon and from the left side of the eye to the right side of the brain. The present results make it appear that the

previous interpretation (Rogers '52) that this indicates fusion of forming primordia should be revised and modified. With additional evidence it seems probable that stimulus acting in the early somite stage likely operates in the period just before during the initiation of bilateralization of the optic primordia. In this connection should be pointed out that in the recent autographic work cited in the introduction (Rogers, '64) it was found that LiCl inhibited synthesis of protein in the lateral portions of the optic vesicles just at time that they are rapidly expanding, generally more than it did in any other tissue examined.

There is now a good deal of evidence that the prechordal substrate is not necessarily the primarily modified tissue in experimental genesis of cyclopia. There is no question that substrate removal in open medullary plate stage in amphibians can be the primary cause of experimentally produced cyclopia but equally without question removal of the telencephalon in the chick at the time the optic vesicles begin to bilateralize can cause cyclopia. In the lithium experiments from stage 42, cited in the introduction it was found that the prechordal substrate or its developmental precursor is primarily affected by the lithium treatment. The more recent evidence of the five workers cited in the introduction employing more precise methods on both amphibian and chick consistently argues against this interpretation.

The total evidence to the present still allows one to suggest that experimental stimuli resulting in the cyclopean mode of development may act on either prechordal substrate or on the neural tissue of telencephalon and diencephalon or on both substrate and neural tissue and that they may be effective over a considerable period of time up to and including the period of actual bilateralization of the optic primordia. It may be added that in formerly occurring cases of cyclopia the actual cause simply is not known except in the few cases of known genetic origin (Wright and Wagner '34; Landauer '51). Production of cyclopia by experimental bilateralization (Moenkhaus, '10; Loeb '11; Newman '17; Moulton '49; Rogers '5-

most certainly also has a genetic basis. But even here the causal developmental mechanisms are unknown.

The median eyes obtained in the present set are directly comparable morphologically to the cyclopean eyes obtained in chemical experiments and to those in fortuitously occurring cases. In many cases in the chemical experiments and in some cases in the operative experiments the optic stalk is shortened or eliminated so that the eye comes to be closely related to the diencephalon, with the tapetum considered as a reflection of the diencephalic walls. This is made clear by comparing figures 19 to 21 of this paper with figures 1 to 11 13 15 and 18 showing cyclopia produced by chemical means in *Fundulus* (Lapra, '52). In cyclopia produced by chemical means (Adelmann '34) or by operation (Levy '05) in amphibia, in the present bird examples and in Mall's ('17) human example, the primary optic cavity is in broad communication with the third ventricle (narrowest in Mall's example) and the tapetum is reflected from the margins of the diencephalic defect. Only in the fish examples (Rogers '52) deviate at all from this fundamental pattern, and these do so with respect to the lack of open communication between the eye and brain cavities. This might be expected because of the secondary mode of origin of these cavities in the teleost. Thus it is apparent that the cyclopean eyes resulting from the present operative procedures in the bird are similar to those experimentally produced or fortuitously occurring in the other three most commonly studied vertebrate classes.

Sockard ('13) and Werber ('15) considered that the mass of two fused eyes to form the cyclopean eye would have to equal that of two separate eyes. The regulation that occurred in the work of Pasquini ('27) and Derscher ('29) on lateral, fused eyes proves a theory that this is not necessarily true. Pasquini ('42) found that cyclopean eyes of skink were only slightly greater than normal size. The eye of embryo no. 261 shows that regulation causes even the well-developed cyclopean eye formed by the total eye-forming field, to be of approximately normal size.

Most of the cyclopean embryos in the present series have a saccus infundibuli and oral hypophysis although the experiments were mostly performed at 10 somites or earlier in ample time to affect the primordia of the pituitary body. Rathke's pocket does not appear until about 22 somites in the chick (study of normal control series see also Hamilton '52, p. 80). Kingsbury and Aldehmann ('24) felt that in cyclopia the failure of the prechordal mesoderm to be removed from the midline not only results in a common oculomotor muscle mass but also in the absence of an oral hypophysis because of the lack of a normal mesoderm-free area for its formation. This viewpoint has recently been reiterated by Giroud Delmas and Martinet ('63) in relation to cyclopean mouse embryos produced by hypervitaminosis A of the pregnant mother. But in experimental as well as fortuitously occurring cyclopia the oral hypophysis actually is more often present than not, as was found in an exhaustive search of the literature (Rogers '57c). The present experiments did, however result in medial massing of the eye muscles to a greater or lesser extent, related directly to the degree of reduction in bilateralization of the eye-forming tissue.

The evidence indicates that the experimental prevention of normal eye and head bilateralization is a process of ventralization, as Backström ('54 '62) has independently proposed for *Xenopus*. In the present cases the median eye is attached to the ventral tip of the diencephalon, the telencephalon being absent, at least ventrally. The modification of eye muscles and their nerves strongly supports this view. In the cases transitional between the normal and the cyclopean (nos. 228 216 197 and 198) the inferior oblique is the only muscle to fuse with its opposite and only in the most extreme case (no. 198) is the medial rectus not present as a separate muscle. The perfect cyclopean with well-developed eye (no. 261) adds the fusion of the inferior recti insertions, the fusion of the right and left oculomotor branches on their way to the fused inferior obliques, and a cross-connection of the ciliary ganglia. The superior obliques here are

lateral to the eye. The perfect cyclopean condition with reduced eye (no. 269) in addition closely masses the oculomotor muscles medially and fuses the superior oblique with its opposite. Within this framework of the significant changes in going from the less to the more severe defect, the changes of all the muscles and their nerves in all the cases studied can be seen to fit. Fortunately occurring cyclopean embryos fit into this series with equal precision as for example Mall's ('17) 6.5 mm synophthalmic human Gemmills ('06) perfect cyclopean trout, and Lyssenkow and Filatova ('28) perfect cyclopean horse. In the present chick material no. 191 has a median orbit, but one pigmented vesicular stalked eye whose relations make it appear to be derived from the right optic vesicle and only the right ciliary ganglion sends a nerve to encircle the eye. Embryo no. 269 has a larger pigmented, vesicular stalked eye whose relations make it appear to be the product of the optic field material of both sides of the embryo, and here both ciliary ganglia send nerves to form a common encircling net around the eye.

Results of the experiments are in agreement with the feeling of Gruenwald ('45) that the choroid fissure is probably necessary for the presence of an optic nerve in cyclopia. The dispensability of an optic stalk in the formation of the nerve (Pasquini '42 on amphibian embryos) is less clear in the chick material than in the fish material already reported (Rogers '32). In the left eye of no. 228 although there is a choroid fissure and optic fibers penetrate the retina to the outside of its coats the stalk is small and dislocated in relation to the papilla. No nerve fibers from the eye reach the brain. This may possibly be explained by the more distant relation of the eye to the diencephalon and consequent greater attenuation of the optic stalk in the chick with partially lateral eye as compared with the cyclopean fish material and Pasquini's cyclopean amphibian material. If the stalk is shortened or fails to form to the extent of relating the eye directly to the diencephalon however nerve fibers are seen to enter the diencephalon from the retina (no. 228 right

eye with shortened stalk, and nos. 216 and 198 right eyes with stalk not formed) in the right eye of no. 197 where the same close relationship of retina and diencephalon is seen the optic fibers do not remain in the diencephalic tissue but run out into the adjacent mesenchyme and end. This embryo is also unusual in that the fibers from the left eye do not decussate but ascend in the homolateral diencephalic wall. A case of non-decussation of the fibers from one eye has been reported in *Fundulus* by Oppenheimer ('50). The close relation of the eye to the diencephalon seen in nos. 216, 197 and 198 is illustrated in the right eye of no. 197 figure 14. It should be noted that the same sort of relation, also at the end of the choroid fissure occurs in the cyclopean eye of no. 261 figure 17.

The present results (see descriptions of maxillary processes) lend no support to and in fact argue against, the interpretation of Mann ('37) that the maxillary processes force the eye primordia together in cyclopia when midline structures are arrested. Substrate disturbances however probably explain deficiencies in the oral region such as the under-development of the right maxillary process of no. 197 although in this case the rest of the oral cavity and mandibular region is normal. Other undescribed cases in the series of operated chicks had deficiencies in the maxillary region while other embryos appeared normal throughout the oral region. Krafka ('45) has criticized the substrate inhibition or deficiency concept with the statement that substrate lack would prevent normal development of the oral region. This view neglects the fact that often oral region disturbances are described even in fortuitously occurring cyclopean embryos. It also neglects the great regulative powers of the early embryo.

SUMMARY

Various degrees of cyclopia including cyclopia perfecta, were produced at the time of beginning bilateralization of the optic vesicles in the chick, by removal of the telencephalon with iridectomy scissors. Operations were performed largely on 5 to 10-somite stages with the most chance

success apparently at 6 or 7 somites. Twelve cyclopean embryos including six that were perfect cyclopean, were produced among the first 271 operations. The cyclopean eyes obtained are morphologically similar in form, and in the details of their relation to the diencephalon, to cyclopean eyes in several vertebrate classes, produced experimentally in a variety of ways, or fortuitously occurring.

In these cyclopean embryos the saccus bifidus and oral hypophysis are usually present, despite medial missing of the extrinsic ocular musculature. In this respect they are similar to the majority of experimentally produced, and especially fortuitously occurring, cyclopean embryos reported in the literature summarized in a previous publication. They are different in its regard from experimentally produced cyclopean amphibian embryos reported in the literature.

Morphological evidence, including the sequence of fusion of the extrinsic ocular muscle components as the cyclopean defect becomes more and more severe, indicates that the experimental reversal of lateralization resulting in cyclopia is a woundization.

Biochemical work on the chick, as well as the recent biochemical work of others on amphibian embryos, supports the interpretation derived from the present operative work. The total evidence to the present time allows one to suggest that experimental stimuli resulting in the cyclopean mode of development may act on either prechordal substrate or on neural tissue of telencephalon and diencephalon, or on both substrate and neural tissue and that they may be effective over a considerable period of time, up to and including the period of actual bilateralization of the optic primordia.

ACKNOWLEDGMENTS

I wish respectfully to dedicate this work to Professor Leigh Hoadley under whose guidance I began work on the nervous system and eye, including the present experiments. His generosity to others, in the roles of teacher, administrator and undergraduate house master has been an outstanding characteristic during his many university years.

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PLATE 1

EXPLANATION OF FIGURES

Figures 3 to 9 are photographs made with transmitted light and red filter of embryos stained with eosin and cleared in cedarwood oil. Figures 10 and 11 are photographs taken with reflected light and green filter at the end of dehydration of the embryo, after staining with eosin.

- 3 Embryo no. 28, dorsal view $\times 8$. Heart primordia in this embryo failed to unite in the midline. c, lens of cyclopean eye; h, chamber of heart; w wing bud.
- 4 No. 43 ventral view $\times 5.5$. The mesencephalon is above and the saccular amnion, which failed to grow over the embryo, is in front of the eye. The eye is single, median, pigmented vesicle.
- 5 No. 191 ventral view of head, $\times 6$. The mesencephalon is above the single orbit, which contains a small, stalked, pigmented vesicle on the right only.
- 6 No. 222, ventral view of head, $\times 6$. The telencephalon is much reduced, and lies between the eyes and the optic lobes of the mesencephalon (above). See text for further description.
- 7 N 246, ventral view of head, $\times 5$. The reduced telencephalon is in front of the optic lobes, and above the broad, single orbit, which contains two stalked, pigmented vesicles.
- 8 No. 261 ventral view of head, $\times 5$. The notch indicating the choroid fissure can just be made out, in the midline below the pupil. The reduced telencephalon is immediately above the eye and the epiphysis appears as a dark spot above the telencephalon. See text for further description.
- 9 No. 261 left side of head, $\times 5$. Descriptive anterior () and dorsal (d) are indicated. Dotted lines indicate the microtechnique plane of sectioning.
- 10 No. 261 uncleared, left side, $\times 5$.
- 11 No. 261 uncleared, ventral view of head, $\times 5$.

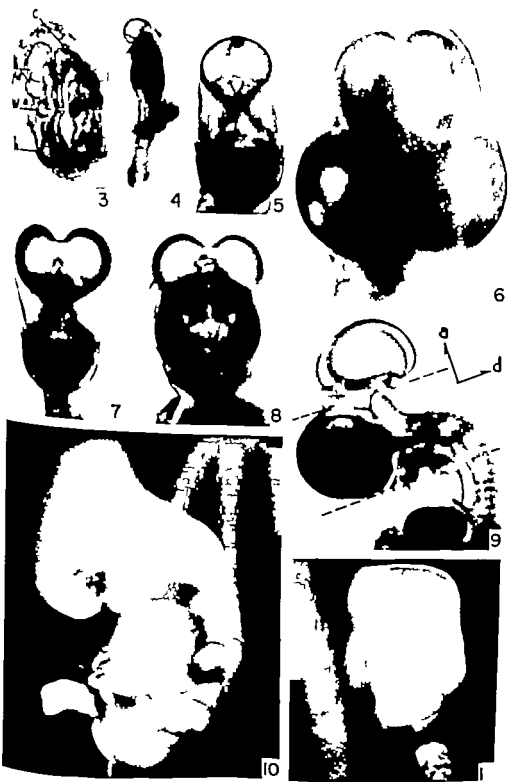
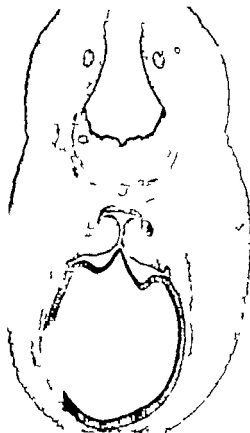
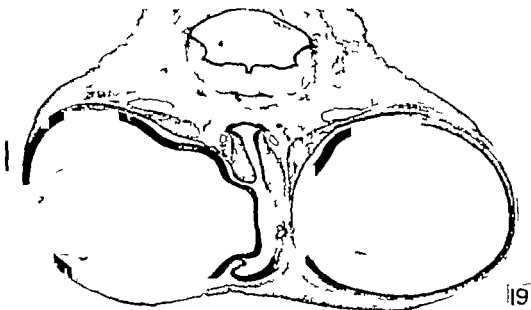


PLATE 3

EXPLANATION OF FIGURES

Photomicrographs of 10 μ transverse sections, modified Bodian preparation.

- 19 Section through the eyes and diencephalon of no. 197 144 sections higher in the series than figure 14 \times 14. The sensory retina on the right projects into the third ventricle through the diencephalic defect, from the edges of which the tapetum of the eye is continued direct reflection. Hindbrain is above.
- 20 Section through the eyes and diencephalon of no. 193 / 14. The embryo had died day earlier younger age and greater shrinkage in preparation account for the great disparity in size as compared with the adjacent figures. The sensory retinal portion of the eyes is in effect, in the third ventricle, with the tapetum of each side continued from the edges of the diencephalic defect. On the embryo left of this level, the tapetum has broken away from the diencephalon. Hindbrain above. See text for further description.
- 21 Section through the perfect cyclopean eye and diencephalon of no. 261 106 sections higher in the series than figure 17 / 14. The tapetum continuous with the edges of the diencephalic defect and the primary optic artery is confluent with the third ventricle. Hindbrain below.



ogenesis were designated according to Leblond and Clermont ('52)

EXPERIMENTAL RESULTS

Effect of heat on distribution frequency of stages of the cycle of seminiferous epithelium Testicular sections from animals sacrificed 2, 8 and 26 days after exposure were analyzed. In some tubules this could not be done due to complete degeneration of germinal epithelium. Such tubules were recorded as "undetermined." Results of the analysis are summarized in table 1. In the two-day group frequency of stages was similar to normal controls although there was a slight increase in stages IX to XI and decrease in stages VII and VIII. At eight days there was a drop in frequency of stages I, II and VI, while the frequency of other stages was comparable with control values. The 26-day sample showed a slight decrease in stages II, VII and VIII. The percentage of tubules in stage XIV was unchanged at all time intervals. However in the two-day group dividing primary spermatocytes were missing, and identification of this stage was based on the numbers of type A spermatogonia, spermatids at step 1+ and pachytene spermatocytes.

HISTOLOGIC OBSERVATIONS

Two days after exposure

Spermatogonia No abnormalities in the microscopic appearance were observed.

Spermatocytes A small number pachytene spermatocytes in stage I show increased affinity of cytoplasm for P stain, pyknotic karyolysis and karyorrhexis (figs. 5-9-13). From stages II-IV an increasing number of cells were affected and tubules were full of cellular debris (figs. 9-13-17). "Ghost cells" with faint PAS-positive cytoplasm and no nuclear material were abundant. At stage V cellular debris disappeared but most spermatocytes showed degenerative changes (fig. 21). In stage VI the pachytene spermatocytes were markedly decreased in numbers, but showed normal morphology. In stage VII all spermatocytes were morphologically intact (figs. 25-29). From stages VIII to XI morphology of pachytene spermatocytes was mostly normal, although counts were below control values (figs. 33-41-45); the few remaining spermatocytes at stage XII showed normal morphology. By stage XIV few spermatocytes and little cellular debris could be identified, but dividing spermatocytes were seen (fig. 57).

TABLE 1

Percentage of tubules in different stages of cycle of seminiferous epithelium after exposure to 43°C for 25 hours

Stage	Control	2d	8d	% Diff.
I	1	1	1	0
II	5.1	6.2	4.9	-4.4
III	1	1	3.8	4.3
IV	4.5	6.6	6.5	3.4
V	5.1	5.0	6.5	3.5
VI	4.2	6.2	4.4	-1.5
VII	3	3	1.4	-1.8
VIII	4	—	11.9	14.9
IX	5	4.4	4.6	3.5
X	5	4.2	4.9	3.4
XI	—	3.8	6.2	3.5
XII	11	10	11.1	5
XIII	11	11	4	3
XIV	4	4.0	3.4	4.4
XV	—	1	1	3.9
undetermined	4	—	68.5	11.3

Spermatids. In stages I and II, spermatids were absent. At stages III and IV there were relatively high or normal counts but numbers of young spermatids showed morphologic changes. Giant cells containing 1 to 5 spermatid nuclei, and spermatids showing ring formation in the nucleus were abundant (fig. 17). From stage V on, spermatids appeared normal (figs. 21, 22, 31, 53, 57). At stages VI and VIII, component of mature groups of spermatids in some tubules was abnormal; they were retained in the deep layers of the germinal epithelium (figs. 25-29) in some mature spermatids particularly at stages VII and VIII, showed pyknosis of the head (fig. 33). In stages IX to XI, many spermatozoa were found retained in the basal layers of the germinal epithelium. Most of them showed pyknotic heads (figs. 31, 41, 45).

Four days after exposure

Spermatogonia. No abnormalities in microscopic appearance were observed.
Spermatocytes. No abnormality could be detected in resting, leptotene or zygotene spermatocytes. Pachytene spermatocytes appeared normal in stage I whereas there was a progressive decrease in their numbers from stages II to V. Tubules in these stages contained cellular debris and spermatocytes showed abnormalities similar to those found in the two-day group. A few spermatocytes showed giant cell formation. Pachytene spermatocytes were absent in stage VI. In stages VII and VIII, the number of pachytene spermatocytes varied widely from none to normal. The number of spermatocytes in tubules at stages IX to XI showed only a slight decrease. No abnormality was detected in either number or morphology of pachytene spermatocytes in stages XII and XIII. In stage XIV all cellular components were present, but most of the dividing cells showed gross abnormalities such as bizarre meiotic figures, pyknotic nuclei, oöcytids and chromatolysis.

Spermatids. Spermatids in stages II to V were absent, and at stage VI only a few grossly degenerating spermatids could be seen. From stage VII on spermatids appeared normal, but large numbers of spermatozoa were retained in the basal layers

of the germinal epithelium at stages VIII to XI. Most of the spermatozoa showed degenerative changes.

Six days after exposure

Spermatogonia. Spermatogonia appeared perfectly normal at all stages of spermatogenesis.

Spermatocytes. No abnormality could be detected in resting, leptotene or zygotene spermatocytes or in early pachytene spermatocytes up to stage III. By stage IV there was a decrease in numbers associated with morphological abnormalities and in stages V through VIII, the primary spermatocytes were absent. Abnormal spermatocytes could be found only rarely in stages IX to XI and at stages XII and XIII, all spermatocytes were normal. In stage XIV however many bizarre meiotic figures were observed. Secondary spermatocytes showed marked degenerative changes.

Spermatids. Only a few young spermatids were present in stages I to III, and many tubules at stage III contained none. From stage VIII on, spermatids appeared normal, although numbers of mature spermatozoa were retained in the layers of the seminiferous epithelium at stages VIII to XI.

Eight days after exposure

Spermatogonia. No abnormalities were observed.

Spermatocytes. Early spermatocytes up to the zygotene stage appeared microscopically normal, as did pachytene spermatocytes in stages I and II (figs. 6-10). Cells in stages III to VI showed giant cell formation or chromatolytic changes (figs. 14-16). Ghost cells and occasional degenerating spermatocytes could be found at stages VII and VIII. From stages IX to XII, only very occasionally could a pachytene spermatocyte be found. These cells exhibited normal structure (figs. 38-42, 46-50). Diakinesis spermatocytes at stage XIII were normal morphologically (fig. 54), but at stage XIV a large proportion of meiotic figures was abnormal. The secondary spermatocytes, however, appeared normal (fig. 58).

Spermatids. Morphological changes in young spermatids at stages I to III consisted mainly of cytolysis and chroma-

tolysis (fig. 10) From stages IV to VIII, no normal spermatids were seen; those present were found in the form of giant cells containing 5 to 16 spermatid nuclei (figs. 18, 22, 26) Spermatids, from stages IX, appeared normal. Retention of spermatozoa in the basal layers of the germinal epithelium at stages IX to XI was also observed (fig. 46)

Twenty-six days after exposure

Testicular sections from this group of animals revealed a picture of regeneration.

Spermatogonia. No abnormalities were observed.

Spermatocytes. Most spermatocytes showed normal structure. A few tubules at stage XIV contained bizarre dividing cells and pyknotic nuclei, but normal secondary spermatocytes (fig. 59)

Spermatids. The only changes observed were retention of spermatozoa in the germinal cell layers of tubules in stages IX and XI, as well as pyknosis of the sperm heads.

It is of interest to note that some tubules failed entirely to regenerate containing only Sertoli cells and a few spermatocytes at 26 days after the experiment. Sertoli and Leydig cells did not show any significant change in morphology in any of the experimental groups.

QUANTITATIVE ANALYSIS OF THE SEMINIFEROUS EPITHELIUM

Two days after exposure

Spermatogonia. The mean number of spermatogonia per cross-section of a semi-

niferous tubule did not differ significantly from control values (table 2)

Spermatocytes. Results of counts are summarized in table 3. There was no change in numbers of resting leptotene and zygotene spermatocytes. Counts of pachytene spermatocytes were normal in stages I and IV. At stage VI, the average count was reduced from a normal of 50 to 21 cells per tubular cross-section. At stage VII, the count was normal. At stage VIII the occurrence of pachytene spermatocytes was irregular some tubules containing normal numbers while others only a few (fig. 33). There was a slight fall in count of pachytene spermatocytes in stages IX and XI, whereas at stage XII, very few were present. No diaknetic or dividing spermatocytes could be found in stages XIII and XIV; secondary spermatocytes and young spermatids were absent (figs. 53, 57)

Spermatids. The counts are presented in table 4. The young group of spermatid at stages I and II were absent, and at stage III their number was considerably below normal. From stage IV on counts were normal.

Eight days after exposure

Spermatogonia. The counts are summarized in table 2. No deviation from control values was observed.

Spermatocytes. Counts of primary spermatocytes are summarized in table 3. Resting, leptotene and zygotene spermatocytes showed no significant variation from normal early pachytene spermatocytes up to stage VI were within the normal range

TABLE 2

Number of spermatogonia per cross-section of tubule at various time intervals after exposure to 43 C for 15 minutes

Spermatogonia	Stage of the cycle	Control	Days after exposure			
			2	8	26	28
A	VII	1.9 ± 0.7	1.0 ± 0.9	1.0 ± 0.8	1.2 ± 0.8	1.2 ± 0.7
	IX	2.9 ± 1.0	2.2 ± 1.6	2.7 ± 1.2	2.2 ± 1.4	2.4 ± 1.4
	XII	3.0 ± 1.0	2.9 ± 1.2	3.4 ± 1.3	3.4 ± 1.3	4.0 ± 1.1
	XIV	3.8 ± 1.8	4.1 ± 1.3	5.2 ± 1.3	5.2 ± 1.3	7.5 ± 2.3
A and Intermediate	I	6.8 ± 2.2	7.5 ± 2.4	8.8 ± 2.2	10.7 ± 2.0	10.7 ± 2.0
	III	8.6 ± 2.9	11.8 ± 3.4	11.4 ± 1.7	13.0 ± 2.3	21.8 ± 2.5
A, Intermediate and B	IV	14.7 ± 3.1	14.9 ± 4.2	15.3 ± 3.0	15.3 ± 3.0	21.8 ± 2.5
	V	23.5 ± 4.0	22.9 ± 4.1	22.5 ± 3.3	22.5 ± 3.3	21.8 ± 2.5

Mean ± standard deviation of the mean.

TABLE 3

Number of primary spermatocytes per cross-section of a tubule at various time intervals after exposure to 43°C for 15 minutes

Spermatocytes	Stage of the cycle	Control	Days after exposure			
			2	8	26	
Leptotene	VII	44.0 ± 5.3	42.7 ± 4.3	40.9 ± 3.0	48.7 ± 4.0	
	IX		46.4 ± 14.6	39.5 ± 13.2	47.3 ± 4.8	
	XI	46.3 ± 4.1	53.1 ± 8.0	42.4 ± 10.5	46.1 ± 6.6	
Zygotene	XII		60.7 ± 4.7	47.0 ± 7.8	59.3 ± 6.5	
	XIV	49.0 ± 5.1	56.0 ± 9.3	49.6 ± 8.5	52.6 ± 8.3	
	I	50.09 ± 8.6	59.8 ± 7.7	51.3 ± 5.2	52.4 ± 10.4	
Pachytene	IV		40.3 ± 13.5	46.6 ± 8.1	51.5 ± 7.0	
	VI		31.0 ± 15.1	47.3 ± 10.5	51.8 ± 7.5	
	VII	69.0 ± 6.7	63.8 ± 7.2	1.5 ± 4.3	64.6 ± 6.4	
	IX		35.2 ± 12.8	nil	56.2 ± 7.6	
	XI		43.6 ± 14.3	nil	60.3 ± 9.0	
	XII		0.7 ± 1.3	nil	60.0 ± 7.9	

Mean ± standard deviation of the mean.

TABLE 4

Number of spermatids per cross-section of a tubule at various time intervals after exposure to 43°C for 15 minutes

Steps of spermatogenesis	Stage of the cycle	Control	Days after exposure		
			2	8	26
1	I	132.3 ± 15.0	0.0	40.6 ± 40.0	normal
2	II	132.3 ± 15.0	0.0	25.1 ± 28.0	normal
3	III	132.3 ± 15.0	23.0 ± 41.2	0.0	normal
4	IV	132.3 ± 15.0	normal	0.0	normal
5	V	132.3 ± 15.0	normal	0.0	normal
6	VI	132.3 ± 15.0	normal	0.0	normal
7	VII	132.3 ± 15.0	normal	0.0	normal
8	VIII	132.3 ± 15.0	normal	0.0	normal
15	I	132.3 ± 15.0	normal	normal	0.0
18	VI	132.3 ± 15.0	normal	normal	29.1 ± 37.6
19	VII	132.3 ± 15.0	normal	normal	22.1 ± 35.0
19	VIII	132.3 ± 15.0	normal	normal	0.0

Mean ± standard deviation of the mean.

Normal the mean count was within 128.3 ± 15.0.

but were reduced or absent in stages VII to XII. At stages XIII and XIV the number of kinetochore and dividing spermatocytes was normal.

Spermatids. The counts are presented in table 4. A significant reduction in number of young spermatids was noted in step 1. This was more pronounced in step 2 and spermatids were absent in steps III to VIII. However in stage IX, the number of step 0 spermatids was normal. The number of spermatids continued to be normal throughout the later stages of spermatogenesis.

Twenty-six days after exposure

Spermatogonia. Counts are summarized in table 2. No significant departure from the normal range was detected.

Spermatocytes. The counts of resting leptotene, zygotene and pachytene spermatocytes were within normal limits (table 3).

Spermatids. The counts are presented in table 4. The number of young spermatids in stages I through VIII was normal. Step 14 spermatids were absent in some tubules at stage XIV and step 15-19 spermatids were absent from stages I through V (figs. 7 11 15 19). In stages

VI and VII they were absent from about 50% of tubules; in stage VIII mature spermatids were also lacking from most tubules. Retention of spermatozoa was again evident in stages IX and XI (figs. 39-43).

DISCUSSION

Earlier studies concerned with the effect of heat on testes were based mainly on histologic evaluation of testicular tissue with no attempt to quantitate the changes in the germinal epithelium. The investigators employed different amounts of heat and various species of animals therefore

the controversy concerning differential sensitivity of germinal epithelium cells to heat was difficult to resolve.

In experiments described here testes of adult rats were exposed to a well defined quantity of heat (43 C for 15 minutes) and sacrificed at time intervals after a single exposure. Testicular tissue was examined for cytomorphologic abnormalities, and a quantitative study was made of changes in numbers of the germinal epithelium elements. Schematic diagram of spermatogenesis and its timing based on data of Clermont et al. (59) was constructed to help in the analysis of the

TWO DAYS AFTER EXPOSURE TO HEAT

STAGES OF CYCLE	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII	XIII	XIV
DURATION (hours)	34.9	23.3	60.1	30.4	47.2	65.5	62.8	21.3	20.6	32.3	17.6	4.1		
	15	16	18	17	17	18	19	19						
	1	2	3	4	5	6	7	8	9	10	11	12	13	14
A	P	P	P	P	P	P	P	P	P	P	P	P	P	P
(observed)	In	In	In	In	B	B	R	R	L			Z	Z	Z
	A	A	A	A	A	A	A	A	A	A	A	A	A	A
	15	16	16	17	17	18	19	19						
	1	2	3	4	5	6	7	8	9	10	11	12	13	14
B	P	P	P	P	P	P	P	P	P	P		P	P	P
(calculated)	In	In	In	In	B	B	R	R	L			Z	Z	Z
	A	A	A	A	A	A	A	A	A	A	A	A	A	A

FIGURE 1

Figs. 1-3 Each figure is composed of two complete and identical diagrams of spermatogenesis (constructed on the basis of data published by Clermont et al., 52). Diagram A shows cells found damaged (shaded) or absent (heavily shaded) at the indicated time intervals after exposure to heat. Diagram B shows position of these cells (found by back calculation) in the germinal epithelium at the time of exposure to heat.

The following symbols are used

A, Type A spermatogoni
B, Type B spermatogoni
In, Intermediate spermatogoni
R, Resting primary spermatocytes

L, Leptonema primary spermatocytes
Z, Zygonema primary spermatocytes
Dt, Diplotene primary spermatocytes
Dv, Primary spermatocytes in division.

EIGHT DAYS AFTER EXPOSURE TO HEAT

STAGES
OF
CYCLE

I II III IV V VI VII VIII IX X XI XII XIII XIV

DURATION
(hours)

34 9 23 3 60 30 47 26 5 62 6 21 3 20 6 32 3 17 6 14 1

A
(observed)



B
(calculated)

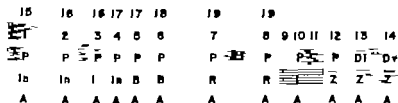


FIGURE 2

TWENTY SIX DAYS AFTER EXPOSURE TO HEAT

STAGES
OF
CYCLE

I II III IV V VI VII VIII IX X XI XII XIII XIV

DURATION
(hours)

34 9 23 3 60 30 47 26 5 62 6 21 3 20 6 32 3 17 6 14 1

A
(observed)



B
(calculated)



FIGURE 3

quantitative data reported here (figs. 1-3). Cells, absent or damaged at a given time interval after heat exposure were marked in the "A" part of the diagram their position in the cycle at the time of exposure found by back-calculation was depicted in the "B" part. For example in testes obtained two days after exposure (fig. 1) spermatids were absent in steps 1 and 2, and markedly decreased in steps 3 and 4. Since step 1 requires about 35 hours and step 2 about 23 hours spermatids exposed to heat early in step 1 should become late step 2 spermatids after 48 hours. Since step 2 spermatids were absent from testes obtained 48 hours after exposure it could be concluded that step 1 spermatids were affected by exposure to heat. Similarly early step 2 spermatids should develop into late step 4 spermatids after 48 hours but the step 4 spermatids were either absent or showed abnormal morphology. Late step 2 spermatids also require about 48 hours to reach step 6 and these were present in day 2 samples. It appears, therefore, that spermatids in steps 1 and early step 2 are susceptible to heat, while those in advanced step 2 are resistant. Since step 5 and older spermatids were normal in two-day samples it appears that all spermatids beyond early step 2 are resistant to heat, or at least the effect is not manifested two days after exposure. Forty-eight hours are required for primary spermatocytes in stage XII to become early spermatids in step 1. Since spermatids in the entire step 1 interval were absent two days after exposure to heat pachytene and diakinetin spermatocytes at stages XII and XIII and dividing spermatocytes in stage XIV must be susceptible. Calculating back for the absent pachytene and dividing spermatocytes at stages XII to XIV we came upon spermatocytes from late stages VII to first half of stage XII. Consequently all pachytene spermatocytes between late stage VII and early stage XII, must be affected by heat. Further analysis of the data indicates that zygotene spermatocytes at stage XIV and pachytene spermatocytes at stages I and II are also affected by heat. Thus results obtained from analysis of the two-day samples suggest that all primary spermatocytes from pachytenes at late stage VII to dividing spermatocytes at

stage XIV and young spermatids at stage I are susceptible to heat, and disappear within 48 hours after exposure. Zygote spermatocytes at stage XIV pachytene spermatocytes at stages I, II and part VII, appeared to be only partially affected. Pachytene spermatocytes at stages III, VI and spermatids from step 2 on appear to be heat-resistant. Analysis of the data obtained four days after exposure reveals that the same groups of cells are heat-sensitive. Reduction of pachytene spermatocytes in stages VII to XI indicates that these cells are partially susceptible when exposed to heat in stages II and IV. Since pachytene spermatocytes were absent in stage VI, may be concluded that pachytene spermatocytes in stage I are severely injured by heat, gradually degenerate and disappear within four days. Furthermore, reduction in numbers of pachytene spermatocytes in stages II to V in the four-day sample indicates that zygotene spermatocytes in stage XII and XIII are also partially damaged by heat. The absence of pachytene spermatocytes in stages V to VII in the six-day group indicates that spermatocytes exposed to heat at stages XII and XIII can develop into zygotene and pachytene spermatocytes but they gradually disappear within six days after exposure. Analysis of the eight-day sample (fig. 2) confirms above calculations and conclusions. It also indicates that leptotene spermatocytes at stage XI are damaged by heat. Pachytene spermatocytes in stage VII showed partial damage in earlier experimental groups. In this sample, absence of young spermatids from stages III to VI suggests that these spermatocytes have variable susceptibility; some degenerate during the pre-meiotic phase others during meiosis while still others continue to form spermatids and enter early phases of spermiogenesis. Nevertheless ultimately they degenerate completely while pachytene spermatocytes at stage V and VI continue to show resistance. Results of a similar analysis of 26-day samples presented in figure 3 not only confirm conclusions derived from earlier time interval groups but provide additional evidence that pachytene spermatocytes at stages V and VI are not affected by heat, since these cells develop into adult spermatozoa, as shown by the presence of steps

and 19 spermatids in a large number of tubules at stages VI and VII, respectively.

In summary the above discussed data show that primary spermatocytes from step XI (leptotene) to dividing spermatocytes at stage XIV are injured by heat, except for pachytene spermatocytes in steps V and VI. In addition, spermatids from step 1 and early step 2 of spermiogenesis are heat-susceptible. Those beyond step 2 continue with the maturation process and form adult spermatozoa. Resting gonocytes, spermatogonia and Sertoli cells are not affected by the amount of heat applied in this experiment.

Morphological abnormalities in degenerating cells appear to follow a definite sequence, different for spermatids and spermatocytes. Cytolysis and chromatolytic changes were very common in young spermatids in steps 1 and 2, and their rate of degeneration was comparatively rapid. Spermids of steps 3 and 4 spermatids formed caps by peripheral accumulation of chromatin materials before actual chromatolysis. These cells were often detached from the cellular layer and enclosed in a common mass of cytoplasm forming giant cells. Giant cell formation was common for spermatids from step 4 to 8 of spermiogenesis, containing up to 16 spermatid nuclei. The acrosomic material of spermatids enclosed by giant cells remained intact, disintegrating subsequently without further differentiation, as evidenced by the presence of giant cells containing step 4 or 5 spermatids in tubules at stages VI or VII. The earliest changes in degenerating spermatocytes occurred in the cytoplasm, which stained positively with PAS. This was followed by pyknosis, chromatolysis and gradual cytolysis. Giant cell formation by spermatocytes was less common than with spermatids and occurred only in severely damaged tubules. Damaged spermatocytes deteriorated more rapidly showing nuclear fragmentation and bizarre meiotic figures.

It is apparent that the dose of heat employed in these experiments may affect cells in two different ways. First, it must be administered with one or more vital functions of some cells, as evidenced by their rapid death shortly after exposure. Secondly it may produce a latent effect,

since certain types of cells are able to continue their development before degenerating at a later stage of maturation. It is of interest that cells in early stages of meiosis (leptotene zygotene) are more resistant to heat than those in later stages. Earliest morphologic signs of damage in cells in pre-meiotic stages of division, were detectable in the cytoplasm, while cells in interphase, like spermatids showed earliest signs of damage in the nuclei. No explanation can be offered at this time for the surprising finding of resistance to heat of pachytene spermatocytes in stages V and VI of spermatogenesis. Spermatogonia, the youngest germinal epithelium cells, showed no morphologic changes following exposure to heat, but continued normal development with ultimate formation of spermatozoa.

Steinberger and Dixon ('59) on the basis of qualitative histologic study of testicular tissue concluded that exposure to temperatures of 43 C for 15 minutes produces a specific type of damage to germinal epithelium limited to one type of cells, primary spermatocytes. Quantitative data reported in this paper provide support for their concept of response-specificity of germinal epithelium to heat. However their conclusions concerning limitation of damage to primary spermatocytes must be modified. First, not all stages of development of primary spermatocytes are sensitive to this amount of heat, and second, in addition to primary spermatocytes the first two steps of spermatid development are also heat-susceptible.

In conclusion, this work supports the hypothesis that germinal epithelium reacts to noxious stimuli, in this case heat, in a precise and specific fashion.

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8 and 19 spermatids in a large number of tubules at stages VI and VII, respectively.

In summary the above discussed data show that primary spermatocytes from stage XI (leptotene) to dividing spermatocytes at stage XIV are injured by heat, excepting for pachytene spermatocytes in stages V and VI. In addition, spermatids in step 1 and early step 2 of spermiogenesis are heat-susceptible. Those beyond step 2 continue with the maturation process, and form adult spermatozoa. Resting spermatocytes, spermatogonia and Sertoli cells are not affected by the amount of heat employed in this experiment.

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PLATE 1

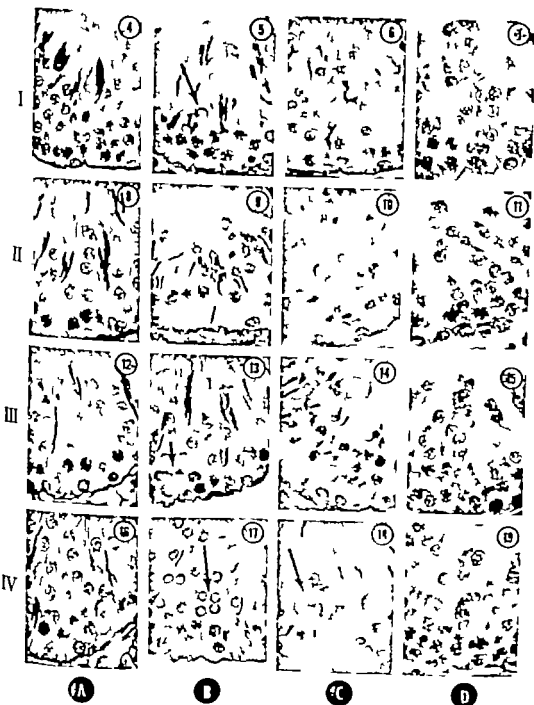
EXPLANATION OF FIGURES

Testicular sections from control and experimental animals stained with PAS-Weigert hematoxylin ($\times 400$)

- Column A: Intact controls
 Column B Two days after exposure
 Column C Eight days after exposure
 Column D Twenty-six days after exposure

Roman numerals indicate the stages of spermatogenesis.

- 4 Normal cellular association of germinal epithelium at stage I of spermatogenesis.
- 5 Note complete absence of step 1 spermatids; pachytene spermatocytes show degenerative changes with formation of "ghost cells" (arrow)
- 6 The young group of spermatids appears morphologically normal although their count was much below normal.
- 7 The young spermatids are present; those at step 15 of spermiogenesis are absent.
- 8 Normal cellular association of germinal epithelium at stage II of spermatogenesis.
- 9 Step 2 spermatids are completely absent and the tubule is full of cellular debris.
- 10 The step 2 spermatid show chromatolytic changes.
- 11 Note complete absence of step 16 spermatids.
- 12 Normal cellular association of germinal epithelium at stage III of spermatogenesis.
- 13 Some spermatids at step 3 show degeneration. The spermatocytes show typical pyknotic changes (arrow)
- 14 The step 3 spermatids are absent; pachytene spermatocytes show chromatolytic changes.
- 15 The step 16 spermatid are absent.
- 16 Normal cellular association of germinal epithelium at stage IV of spermatogenesis.
- 17 Typical ring formation in the step 4 spermatid (arrow)
- 18 The step 4 spermatids are absent. The spermatocytes show degenerative changes and giant cell formation (arrow)
- 19 Step 17 spermatids are absent.



(57) claimed to produce brain malformations in the offspring of pregnant mice by immunizing the mice with brain tissue. Barber Willis and Afeman ('61) utilizing a similar immunizing procedure did not obtain brain malformations but reported a high incidence of eye lesions in the offspring of mothers immunized with brain antigen. Both these provocative studies should be extended to determine the reason for the differences in results since other similar experiments have not yielded positive results. Steblay ('63) failed to produce nephritis in fetal lambs in spite of the presence of a fulminating autoimmune nephritis in the mothers. Chandler, Kyle, Hung and Blizzard ('62) attempted to produce cretinism in the offspring of pregnant animals with experimentally induced autoimmune thyroiditis. They were unsuccessful even though they demonstrated circulating antibodies to thyroid tissue in the fetal and newborn animals. It appears that most experimental autoimmune disease depends on the accessibility of sensitized lymphocytes to the involved tissue. Since in most instances the sensitized lymphocyte does not cross the placenta, one would not expect autoimmune disease in the mother to be consistently reflected in the fetus.

The first investigation in mammals dealing with antisera as general teratogenic agents without specificity was in '61 (Brent, Averch and Drapiewski '61). Kidney antiserum was reported to be a potent teratogenic agent which produced malformations involving multiple organs and systems when injected into rats eight days pregnant. David, Mercer, Parot and Tuchmann-Duplessi ('63) repeated this work and obtained similar results. The following presentation deals with the further description and characterization of this antiserum as a potent teratogenic agent when administered on four separate days of rat gestation.

MATERIALS AND METHODS

Wistar rats utilized in this study were obtained from our own colony which has been randomly inbred for the past seven years. New Zealand rabbit were obtained from commercial sources for antibody production. Female rats were mated with

caged males for 12 hours during the night. Those females that had been inseminated were considered to be zero hours and zero days pregnant at 9 A.M. the next morning. After seven, eight, nine or ten days of pregnancy the pregnant rats were anesthetized (sodium nembutal 30 mg/kg) and laparotomized. The number and condition of the embryonic sites were recorded and the abdominal incision was closed. Antiserum was injected at this time at various dosage levels: 0.125 ml, 0.25 ml, 0.50 ml, 0.75 ml, 1.0 ml and 1.25 ml per 100 grams of pregnant rat. Control (non-immunized) rabbit serum was administered to rats that were seven, eight, nine or ten days pregnant at dose levels of 1.0 ml or 2.0 ml per 100 grams of pregnant rat. The intravenous, subcutaneous and intraperitoneal routes were utilized although the material being presented in this paper deals mainly with the results of intraperitoneal administration. Following the administration of antiserum after seven, eight, nine or ten days of pregnancy the mothers were weighed daily. After 21 days of pregnancy the mothers were sacrificed and the fetuses were delivered by cesarian section. Maternal urine and blood were obtained for protein determinations. The fetuses and placentae were examined grossly, weighed and fixed in 10% formalin or Bouin's fixative for dissection or histological section.

Antisera were obtained in the following manner. Male and female adult rats were perfused with buffered isotonic saline via the abdominal aorta. The tissues were homogenized in a Virtis tissue homogenizer and lyophilized. The dry tissue powder is stored at -20°C. The rabbits were immunized with 900 mg of resuspended tissue mixed with an equal amount of Freund's adjuvant and intramuscular injections of these materials were given at weekly intervals for three weeks followed by monthly injection. Bleeding was performed at bi-weekly intervals. The blood was allowed to clot and the serum was stored at -40°C until enough was obtained to form a large pool. Whole serum was used throughout the studies in this paper although fractions of this serum have also been utilized.

Antisera were prepared against (1) adult rat kidney (2) rat serum, (3) rat red blood cells, (4) adult rat liver (5) maternal and fetal term placenta, (6) adult rat muscle (7) fetal skin, (8) adult rat glomeruli and (9) fetal liver. These antisera were studied electrophoretically immunoelectrophoretically and by immunodiffusion analysis. The data reported in this manuscript deals mainly with the effect of rabbit anti-adult rat kidney serum. The ineffectiveness of normal rabbit serum, rabbit anti-rat serum and rabbit anti-rat red blood cell antiserum in producing malformations was previously reported (Brent, Averch and Drapiewski, '61)

RESULTS

Since the teratogenicity of heterologous rat kidney antiserum has been adequately demonstrated in eight-day-old rat embryos (Brent, Averch and Drapiewski, '61) the

main purpose of this report is to describe in detail the quantitative and qualitative effects of this antiserum when administered to pregnant rats on various days of gestation. Other experimental teratogenic agents (uterine vascular clamping, chemotherapeutic agents irradiation, trypan blue etc.) demonstrate a triad of effects upon the embryo which includes lethality growth retardation and congenital malformations. Rat kidney antiserum produces this same triad of effects at various dosage levels.

Lethal effect of kidney antiserum on seven- eight nine and ten-day-old embryos: (table 1)

The resorption rate of control embryos whose mothers are laparotomized during the period of differentiation is 8.2% (table 1). The administration of normal rabbit serum in large doses (2.0 ml per 100 grams of pregnant rat) to pregnant

TABLE 1
The growth retarding and lethal effect of rabbit anti-rat-kidney anti-serum and normal rabbit serum on rat embryos 7, 8, 9 and 10 days of age

Gestational age	Dose in milliliters per 100 g pregnant rat		Number of embryos (post-injection)	Per cent mortality	Term fetuses		Overall per cent fetuses malformed (see tables 2 and 3)
	Normal rabbit serum	Rabbit anti-rat kidney antiserum			Number	Weight \pm S.D.	
7 days	0	0	97	8.2	89	4.80 \pm 0.31	1.7
8 days	2.0	0	49	6.1	45	4.87 \pm 0.64	2.2
9 days	2.0	0	54	3.7	52	4.74 \pm 0.42	0.0
10 days	2.0	0	67	7.5	63	4.62 \pm 0.71	1.6
7 days	2.0	0	41	9.7	37	4.51 \pm 0.44	0.0
8 days	0	0.25	73	13.7	63	4.29 \pm 0.36	23.4
		0.50	66	43.4	36	3.99 \pm 0.50	38.9
		0.75	71	77.5	16	3.83 \pm 0.63	81.4
		1.00	22	95.1	1	3.81	100.0
9 days	0	0.25	68	19.0	55	4.07 \pm 0.17	85.6
		0.50	87	49.4	44	4.04 \pm 0.21	79.8
		0.75	68	97.1	2	1.55	100.0
		1.00	71	100.0	0	—	—
10 days	0	0.25	102	11.8	90	4.36 \pm 0.60	34.4
		0.50	87	23.0	54	4.11 \pm 0.76	53.6
		0.75	97	100.0	0	—	—
7 days	0	0.25	83	7.5	86	4.45 \pm 0.80	14.0
		0.50	80	13.6	69	3.87 \pm 0.67	42.0
		0.75	72	91.7	6	3.32 \pm 0.23	100.0

rats on the seventh eighth ninth and tenth days of gestation resulted in an incidence of resorptions comparable to the control laparotomized animals being respectively 6.1 3.7 7.5 and 9.7% (table 1). Thus neither the administration of rabbit serum or the operative procedure contributed to the increased resorptions produced by the administration of kidney antiserum. Rabbit antiserum made against rat muscle liver plasma and skin administered to pregnant rats after eight days of pregnancy resulted in 6.2 9.1 9.2 and 4.0% resorptions respectively. These resorption rates are within the range of the two previously mentioned control groups.

On the other hand, the administration of kidney antiserum to embryos aged seven to ten days resulted in an increased resorption rate which was directly related with the dose administered (table 1). In fact an increased resorption rate was present at all the stages and in all the dosage groups studied except in the ten-day-old embryos given the lowest dose (0.25 ml/100 g pregnant rat). Furthermore the mortality reached 100% in the four embryonic stages studied following the administration of 1.0 ml/100 g of pregnant rat. The dose response curve varied on different days of gestation with the eight day-old rat embryo being the most sensitive to the lethal effects of low doses of the antiserum.

Growth retarding effects of kidney antiserum when administered to seven- eight nine- and ten-day old embryos (table 1)

The growth retarding effect of kidney antiserum demonstrated the same dose response relationship as the lethal effect of this antiserum. The laparotomized control fetuses weighed 4.80 g at term and the mean fetal weights of all the experimental groups exposed to antiserum weighed significantly less (table 1). Furthermore as the dose of antiserum increased from 0.25 ml to 1.0 ml/100 g of pregnant rat, the amount of fetal stunting also increased. Thus there was an inverse relationship between fetal growth and the dose of antiserum administered. As with the lethal effect of this antiserum the

eight-day-old embryos were most sensitive to the growth retarding effect at low doses of the antiserum (0.25 ml/100 g rat). At higher doses all four stages that were studied had obvious growth retardation.

The normal rabbit serum, when injected into rats seven, eight nine and ten days pregnant at the dose level of 2.0 ml/100 g of pregnant rat, resulted in term fetuses of normal weight (table 1). Statistical analysis using the t test revealed no significant difference between the term fetal weights of the operative controls and any of the term fetal groups receiving control rabbit serum (table 1).

The teratogenic effect of kidney antiserum when administered to seven- eight nine- and ten-day-old embryos (tables 2, 3) (figs 3-19)

The incidence of malformations in fetuses whose mothers were laparotomized during the period of differentiation, but who did not receive kidney antiserum, was 1.7%. Of the 1012 operative control fetuses, 18 were malformed. Fifteen had one malformation. Nine of these had borderline hydrocephalus which was graded one plus or two plus on a one-to-four scale. The incidence of hydrocephalus in our control stock is very low. Two have been observed in adults during the past five years. But the etiology of the hydrocephalus observed postnatally may not be the same as the low grade lesions observed at term. It is not known at this time what percentage of hydrocephalus observed at term is truly normal. Two fetuses had unilateral microphthalmia. One fetus each had unilateral anophthalmia, a right-sided aortic arch and a cleft palate.

Three other control fetuses had more than one malformation. Two fetuses had a hydrocephalic lesion associated with an eye lesion. One stunted fetus implanted at the ovarian position had multiple malformations, including an encephalocele, anophthalmia, club feet and eversion.

There were 188 surviving fetuses in the control groups that were exposed to 2.0 ml/100 g of pregnant rat of normal rabbit serum when seven, eight, nine and ten days pregnant (table 1). There were no

TABLE 2

The incidence of malformations following the intraperitoneal injection of rabbit anti-rat-kidney whole antiserum in pregnant rats 7, 8, 9 and 10 days pregnant

	Dose of antiserum in milliliters/100 g of pregnant rat														
	0		0.25				0.50				0.75				1.0
Gestational age time of injection	—	7	8	9	10	7	8	9	10	7	8	9	10	7	
Malformations per term live fetus															
One malformation	15	11	4	20	6	0	13	6	8	2	0	—	—	—	
Two malformations	2	4	27	7	5	0	10	9	2	5	0	—	—	—	
Three or more malformations	1	0	16	4	1	14	12	15	19	6	2	—	6	1	
Total malformed fetuses	18	15	47	31	12	14	35	30	29	13	2	—	6	1	
Total live fetuses	1012	63	55	90	86	38	44	54	69	18	2	—	6	1	
Percent malformation	1.7	23.4	85.6	34.4	14.0	38.9	79.6	55.6	42.0	21.4	100	—	100	100	

malformed fetuses in the eight and ten-day-old groups, although one fetus in the eight-day group exhibited a shorter than usual innominate artery (table 1). There was one malformed fetus in the seven-day group (right-sided aortic arch) and nine-day group (mild hydrocephalus).

The incidence of malformations following the administration of kidney antiserum was directly related to the dose of antiserum administered (tables 1 and 2). The incidence of malformations following 0.25 ml of antiserum/100 g of pregnant rat was increased at all stages studied. At this low dose the eight-day-old rat embryo was the most sensitive of the four stages studied, in that 85.6% of the surviving embryos were malformed. Higher doses not only increased the incidence of malformations, but also the severity of malformations (table 2). As examples of this observation, it will be noted that 15 of 63 litters whose mothers were seven days pregnant when given 0.25 ml of antiserum/100 g of rat were malformed an incidence of 23.4% (table 2). None of these litters had three or more malformations. At the next higher dose of antiserum (0.50 ml/100 g of rat) the over-all incidence of

malformations rose to 38.9% and all the 14 malformed fetuses had three or more malformations. This same phenomenon occurred in the eight, nine- and ten-day old embryonic groups (table 2).

The dose of antiserum which produced a high incidence of malformations in the term fetuses (70–100%) also resulted in a high over-all mortality in the embryos exposed to this dose of antiserum (greater than 40%). The converse was not always true in that increased mortality did not have to be associated with an increase in malformations. As an example rats pregnant for ten days that received 0.25 ml of antiserum/100 g had no increase in embryonic mortality (7.5% table 1) but the incidence of malformations was seven times normal (14.0%).

The spectrum of malformations produced by kidney antiserum differed over the four gestational periods encompassed in this study. Although certain malformations were produced when antiserum was injected into seven- eight nine- or ten-day-old embryos, other malformations were peculiar to one or two particular embryonic stages (table 3). Of the 522 experimental fetuses in this study 234 were

TABLE 3

The spectrum and incidence of malformations produced by the intraperitoneal injection of rabbit anti-rat-kidney antiserum into rats 7, 8, 9 and 10 days pregnant

Gestational age in days	7	8	9	10
Total live term fetuses from all dosage groups on each day	116	101	144	161
Total live term fetuses with one or more malformations	43	84	61	47
Per cent live term fetuses malformed	37.1	83.2	42.4	29.2
Per cent of malformed fetuses with particular malformation				
Gestational age in days	7	8	9	10
Situs inversus totalis	—	2.4	—	—
Ophthalmia and exlaccation	—	8.3	—	—
Anencephaly	—	2.4	3.3	—
Meningocele	—	1.8	—	—
Encephalocele	3.9	15.5	3.3	—
Hydrocephaly	49.0	75.0	47.5	78.7
Unilateral microphthalmia	11.7	—	9.8	8.5
Bilateral microphthalmia	17.8	—	14.8	4.8
Microphthalmia and anophthalmia	7.8	—	1.8	10.8
Unilateral anophthalmia	11.7	4.8	3.3	—
Bilateral anophthalmia	45.0	91.7	63.9	23.4
All eye malformations	93.8	96.5	93.4	46.7
Cleft palate	—	4.7	6.6	—
Facial clefts	—	2.4	6.6	—
Jaw and tongue malformations	28.0	8.3	14.8	—
Micrognathia	17.8	1.2	1.8	—
Total aortic arch anomalies	9.8	25.0	21.3	36.9
Right sided A.A.	—	2.4	3.3	—
Infantile coarctation	3.9	—	3.3	—
Situs inversus A.A. + infantile coarctation	5.8	2.4	—	—
Situs inversus A.A.	—	7.1	14.8	12.8
Other A.A. malformations	—	13.1	—	23.4
Heart anomalies	—	2.4	—	—
Diaphragmatic anomalies	3.9	2.4	—	—
Right renal agenesis	3.9	—	—	—
Left renal agenesis	1.9	15.5	21.9	—
Bilateral renal agenesis	11.7	10.7	19.1	—
Left ovarian agenesis	—	1.2	2.1	—
Left uterine agenesis	—	2.3	1.8	—
Bilateral testicular agenesis	—	—	3.3	—
Right-sided cryptorchidism	—	—	3.3	—
Left-sided cryptorchidism	7.8	2.4	6.6	—
Bilateral cryptorchidism	6.8	12.1	—	—
Bilaterally absent ears	—	2.4	—	—
Absent spleen	3.9	2.4	—	—
Syndactyly	—	—	—	29.7
Abnormal tail	—	—	—	8.5
Limb hypoplasia	—	—	—	4.2
Rectovaginal fistula	—	1.8	—	—

malformed. Therefore the percentages listed in table 3 are based on 234 abnormal fetuses. Only the significantly large differences in incidence and types of malformations can be relied upon because of the small size of the group of malformed embryos. In spite of this some interesting observations can be made

Eye abnormalities as a group were the commonest malformations, occurring in 84, 97, 93 and 47% of the seven, eight, nine- and ten-day-old malformed embryos (figs. 11, 12). Severe hydrocephalus was the next most common malformation occurring in all four stages studied (fig. 6). On the other hand micrognathia

predominantly in the seven-day group (fig. 11). Evisceration, encephalocele, omphalocele, situs inversus totalis and bilateral cryptorchidism were associated with the administration of antiserum to eight-day-old embryos (figs. 3 5 7-9 19). Left renal agenesis and bilateral renal agenesis were associated with the nine-day-old group (figs. 15 16) and syndactylous tail abnormalities and limb hypoplasia were only present in fetuses from the ten-day-old group (fig. 18). Thus some malformations or group of malformations occurred in embryos from all four stages that were studied. Other malformations were associated with two or three particular stages having a peak incidence at one stage, while some malformations occurred only at one stage. This is the typical result one observes following the administration of a teratogenic agent at various dosages and periods of gestation.

The effects of other tissue antisera upon rat embryos

In the previous report (Brent, Averich and Drapiewski, '61) it was stated that rabbit antisera to rat red blood cells, muscle, brain, serum, fetal skin and liver were ineffective in producing malformations or growth retardation in rat embryos. The antisera against rat red blood cells and rat serum were very strong as measured by serial dilutions in an immunodiffusion system and therefore it appears that no teratogenic effect results from the administration of these antisera. On the other hand, it is possible that the failure to produce effects on the embryo with the other antisera is due to a low titer of the teratogenic factors rather than their complete absence. Before other tissue antisera are considered to be ineffective in producing malformations more, extensive investigations must be carried out with each specific tissue antiserum.

At the time of the first report of the teratogenic effect of kidney antiserum (Brent, Averich and Drapiewski, '61) it was also stated that rabbit anti-rat-placental serum did not produce malformations, although a significant increase in absorptions was produced by injecting this antiserum into rats 8 9 10 and 15 days

pregnant. By increasing the dose of the placental antiserum to 1.25 ml/100 g of rat eight days pregnant, malformations have been produced. The incidence and severity of malformations resembles the effects of kidney antiserum given at the same stage of gestation. There is no question that properly prepared placental antiserum is a potent teratogenic agent in the rat, but the spectrum of malformations and the incidence of malformations on various gestational days has not been determined.

Characterization of the rabbit anti-rat-kidney antiserum

The total protein of the kidney antiserum utilized in this study was 6.8 grams per cent. The electrophoretic analysis on cellulose acetate paper revealed the following fractions and their quantities: albumin 3.54 g % (52%) alpha 1 0.69 g % (10.2%) alpha 2 0.58 g % (8.5%); beta 0.62 g % (9.1%) gamma 1.31 g % (19.3%). The normal rabbit serum used in this study had a total protein of 7.0 grams per cent and the following fractions: albumin 4.73 g % (67.5%) alpha 1 0.26 g % (3.8%) alpha 2 0.19 g % (2.8%) beta 0.76 g % (10.8%) gamma 1.04 g % (14.9%).

The immunodiffusion pattern in agar when kidney antiserum is reacted against resuspended lyophilized kidney consists of nine separate precipitin bands (fig. 1). Seven of these bands are the result of reactions between antiserum and blood serum constituents in the kidney. The remaining two bands are produced by antibodies reacting with tissue antigens in the resuspended kidney tissue. At the present time it is not known whether both these antibodies are responsible for the teratogenic effect of kidney antiserum or whether this pathologic effect resides with only one or neither of these two antibodies against kidney antigens.

Maternal effects of rabbit anti-rat kidney antiserum

Proteinuria appeared within 24 hours in the maternal rats receiving the kidney antiserum. The proteinuria at term ranged

between 3 to 10 mg of protein/ml of urine. Frequently marked changes were observed in the shape of the maternal liver at term. The liver was decreased in size and the edges were blunted as if there had been an acute decrease in size. Clinically the animals were mildly edematous and this was substantiated by their increased weight gain. On rare occasions in the higher dosage groups (10 ml/100 g of rat) a mother would die several days after receiving the kidney antiserum. Eleven mothers out of 240 were lost in this manner. The blood pressure was not measured in these animals but other investigators have reported that this antiserum produces a syndrome of hypertensive nephrosis-nephritis. It is also well known that alterations in cholesterol metabolism and amino acid excretion occur in this type of experimental nephrosis. Thus, the maternal environment offered to the experimental fetuses is considerably different from that of a normal pregnancy.

DISCUSSION

The experimental results leave no doubt as to the teratogenicity of kidney antiserum in the rat and, furthermore, the preliminary results with placental antiserum indicate that it is also a potent teratogenic agent. Since both these antisera have had wide use in the past and have been used in pregnant animals it is interesting that a teratogenic effect had not been reported previously. In 40 Seegal, Loeb and co-workers began an interesting series of experiments utilizing rabbit anti-rat placental serum in the pregnant rat (Seegal and Loeb '46, Loeb and Seegal '43). In later years they switched species and utilized dog placenta (Bevans, Seegal and Kaplan '55, Seegal, Hansson, Gaynor and Rothenberg '55, McCaughy '55). Their findings indicated that both anti-kidney and anti-placental serum could induce an identical form of chronic nephritis. When this antiserum was injected into pregnant rats hypertension, nephritis, albuminuria and edema were produced mimicking the clinical syndrome of toxemia of pregnancy. Fetal loss was increased, as evidenced by resorptions or stillbirths depending on the time during gestation that the antiserum was injected.

No malformations were reported in these experiments, in spite of the fact that antiserum was administered as early as the ninth day of rat gestation. Pressman and Korngold ('57) evaluated the immunologic relationship between rabbit anti-rat-kidney antibody and Seegal's antiplacental serum. They concluded that although many of the localizing antibodies of kidney and placental antisera are common, different antibodies are concerned with the interruption of pregnancy and the production of nephrotoxicity. In '61 we demonstrated that kidney antiserum, labeled with radioactive iodine, localized in the kidney and placenta (Brent, Averch and Drapewall, '61). Using fluorescent antibody techniques Steblay ('61, '62 and '63) demonstrated that anti-placental serum localizes in the glomerular basement membrane, tubules, capillaries and the media and adventitia of the arteries of the kidney. He also produced an autoimmune nephritis in pregnant sheep with placental antigen yet the kidneys of the fetus were not affected during the pregnancy or during the nursing period. This autoimmune nephritis was severe enough to be fatal to the mothers in from 45 to 54 days from onset (Steblay '63).

Thus there is ample evidence to support the thesis that placental and kidney antisera have antibodies in common and that their pathological effects are similar in many respects. In spite of the relationship demonstrated between kidney and placental antisera the mechanism of teratogenesis is still elusive. There are a number of possibilities that must be considered in evaluating the teratogenic effect of kidney antiserum.

1. *Biochemical or physiological alterations in the maternal organism.* It is of interest that malformations were produced when kidney antiserum was injected into rats seven and eight days pregnant. This is a period quite insensitive to the teratogenic effects of irradiation. If one postulates that the seven-day-old rat embryo is not subject to environmentally induced teratogenesis then one must conclude that the alterations produced by this antiserum persisted until the embryo was subject to teratogenic stimuli. This in fact could be mediated via a persistent metabolic lesion

1. to the mother or a persistent alteration at the implantation site

2. Direct action of the antiserum upon the embryo. It is impossible to rule out a direct effect upon the embryo at the present time even though tracer studies demonstrate that little of this antiserum crosses the mature placenta near term. But during the period when malformations are readily produced there is no placenta or one just being formed. Thus the embryo might be exposed to small but significant quantities of antiserum during the four stages of gestation studied. The fact that different types of malformations were produced on the various days does not rule out the possibility that the antiserum acted directly on the embryo. Some might argue that if the embryo is directly exposed to antiserum there should be primarily kidney malformations rather than a changing spectrum of malformations on various days of gestation. But again it should be pointed out that the embryo has not even differentiated into germ layers at the very early stages studied and it has not been determined whether cells which will eventually form kidney tissue are immunologically different from other cells in the inner cell mass stage.

3. The kidney antiserum may be interfering with trophoblast formation and function. Because of the immunologic relationship between placenta and kidney this line of investigation may yield fruitful results. If the antiserum can produce long lasting alterations in the trophoblastic tissue, then an explanation may exist for the ability of this antiserum to result in malformations even when injected into pregnant animals only seven and eight days pregnant. This same line of reasoning applies to the maternal decidual reaction, since interference with its formation and/or function could lead to the same phenomenon that may result from trophoblast pathology. If decidual or trophoblast dysfunction can be induced by this antiserum then the teratogenic factors in the serum would be acting in a unique fashion which would warrant careful evaluation of the mechanisms involved.

Besides not knowing the site of action of the teratogenic serum, that is the maternal organism the embryo or the deciduo-trophoblast, we are unaware of the biochemical or physiological event triggered by the injection of the antiserum. Is the teratogenesis the result of an immune reaction between proteins and cells in the host and the humoral antibodies injected? Is histamine release host cell death, host cell dysfunction or some other pathologic event important in initiating the chain of reactions that eventually results in teratogenesis? Although it seems most likely that the immune bodies present in the kidney antiserum are the offending molecules the data to date are not incontrovertible. It is possible that the teratogenic factor is produced by rabbits responding to kidney antigen but is unrelated to kidney antibodies? Thus even if we knew the site of action of the teratogenic factors we still do not know what is taking place at that site or sites and whether an immune reaction is involved.

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PLATES

PLATE 2

EXPLANATION OF FIGURES

- 7 Severe encephalocele in term fetus that received kidney antiserum when eight days old.
- 8 A small encephalocele (arrow) and absence of the external ear in term fetus exposed to kidney antiserum when eight days old (see control fig. 10)
- 9 Severe encephalocele, facial cleft and failure of fusion and development of the maxillary processes in term fetus exposed to kidney antiserum when eight days old.
- 10 Normal term fetus with the skin dissected away from the eye, normal external ear and normal lower jaw
- 11 Anophthalmia and absence of the lower jaw in a term fetus exposed to kidney antiserum when seven days old (see control fig. 10)
- 12 Anophthalmia and absence of the external ear in term fetus exposed to placental antiserum when eight days old



Aldehyde-fuchsin Positive Material in Brain of Squirrel Monkey (*Saimiri sciureus*)

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ABSTRACT In the squirrel monkey nerve cells in certain areas of the brain are characterized by abundant granules which stain intensely with aldehyde-fuchsin but not with chromium hematoxylin.

These cells fall into three main types. Type A, with a polar clumping of the granules, characterizes the region surrounding the stria terminalis in the amygdala and the supratrochlear nucleus of the mid-brain. Type B, which have heavy diffuse granulation, are found in the lateral and caudal hypothalamus and in nucleus raphe ventralis. Less heavily granulated cells classified as Type C distinguish the entire nucleus subthalamicus, and are prominent in nucleus septalis triangularis, rostral midline thalamus, and area CA2 of the rostral hippocampus. Cells of these corresponding types and distribution are not seen in the brains of cat, rat and mouse.

The cerebellum and pineal body contain extracellular material which stains with aldehyde-fuchsin but not chromium hematoxylin.

The granules of the nerve cells stain with PAS Sudan black B, and oil red O suggesting that they have carbohydrate and lipid components.

As in other species, the neurosecretory substances of the paraventricular and supraoptic nuclei are stained both by aldehyde-fuchsin and chromium hematoxylin. Material showing positive reaction to both these stains is also found in the glia of the nucleus septalis triangularis, subfornical organ, lateral hypothalamus, and locus caeruleus. All these regions, except the lateral hypothalamus, show similarly staining material in the extracellular space.

Of anatomical interest is the close association of the aldehyde-fuchsin positive neurons with phylogenetically ancient cellular structures and fiber systems of the brain. In the squirrel monkey they would seem to provide a basis for further characterization of certain nuclei and new division of the amygdala.

MATERIALS AND METHODS

The squirrel monkey is a small, New World monkey with an average weight of about 700 g. Its brain is comparable in size to that of the cat. The stereotaxic brain atlas prepared by Gergen and MacLean ('62) served as an anatomical reference for this study. Material was obtained from four males and one female of adult size but undetermined age. Four animals were perfused with Bouin's fluid, after which the brains were dehydrated, imbedded in paraffin, and sectioned at 8 μ . Throughout the greater part of three of these brains sections were stained at every 0.5 mm and sometimes every 0.25 mm. The remaining animal was perfused with a 10% formalin-1% agar solution, and frozen sections were cut at 20 μ . Complete

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This study was originally undertaken in the squirrel monkey (*Saimiri sciureus*) to explore the possibility of finding neurosecretory material (Scharer and Scharer '71; Bargmann, 49) in the amygdaloid region. The outcome was negative in so far as no cells were found which stained both with chromium hematoxylin and aldehyde-fuchsin. In a circumscribed part of the amygdala, however, distinctive cells were found with densely packed granules that stained intensely with aldehyde-fuchsin but were chromium hematoxylin negative. This made it of interest to explore the entire brain to learn if similar staining cells were present elsewhere. This report will describe the distribution of intra and extracellular aldehyde-fuchsin positive (AFP) granular material that was found, as well as the preliminary attempt to identify its chemical nature. Findings will also be given of a preliminary comparative study

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MATERIALS AND METHODS

The squirrel monkey is a small, New World monkey with an average weight of about 700 g. Its brain is comparable in size to that of the cat. The stereotaxic brain atlas prepared by Gergen and MacLean ('62) served as an anatomical reference for this study. Material was obtained from four males and one female of adult size but undetermined age. Four animals were perfused with Bouin's fluid, after which the brains were dehydrated, imbedded in paraffin, and sectioned at 8 μ . Throughout the greater part of three of these brains sections were stained at every 0.5 mm and sometimes every 0.25 mm. The remaining animal was perfused with a 10% formalin-1% agar solution and frozen sections were cut at 20 μ . Complete

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This study was originally undertaken in the squirrel monkey (*Saimiri sciureus*) to explore the possibility of finding neurosecretory material (Scharer and Scharer, 1961; Bargmann, 1961) in the amygdaloid region. The outcome was negative in so far as no cells were found which stained both with chromium hematoxylin and aldehyde-fuchsin. In a circumscribed part of the amygdala, however, distinctive cells were found with densely packed granules that stained intensely with aldehyde-fuchsin but were chromium hematoxylin negative. This made it of interest to explore the entire brain to learn if similar staining cells were present elsewhere. This report will describe the distribution of intra- and extracellular aldehyde-fuchsin positive (AFP) granular material that was found, as well as the preliminary attempt to identify its chemical nature. Findings will also be given of a preliminary comparative study

'uchsin Positive Material in Brain of Monkey (*Saimiri sciureus*)

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ABSTRACT In the squirrel monkey nerve cells in certain areas of the brain are decorated by bundant granules which stain intensely with aldehyde-fuchsin but which chromatin hematoxylin.

These cells fall into three main types. Type A, with a polar clumping of the granules, characterizes the region surrounding the stria terminalis in the amygdala and the suprachiasmatic nucleus of the mid-brain. Type B which have heavy diffuse granulation, are found in the lateral and caudal hypothalamus and in nucleus raphe nucleus. Less heavily granulated cells classified as Type C distinguish the entire nucleus subthalamicus, and are prominent in nucleus septalis triangularis, rostral midline nucleus, and area CA2 of the rostral hippocampus. Cells of these corresponding types and distribution are not seen in the brains of cat, rat and mouse.

The cerebellum and pineal body contain extracellular material which stains with aldehyde-fuchsin but not chromatin hematoxylin.

The granules of the nerve cells stain with PAS, Sudan black B and oil red O, suggesting that they have carbohydrate and lipid components.

As in other species, the neurosecretory substance of the paraventricular and supraoptic nuclei is stained both by aldehyde-fuchsin and chromatin hematoxylin. Material showing positive reaction to both these stains is also found in the glia of the nucleus septalis triangularis, subfornical organ, lateral hypothalamus, and locus coeruleus. All these regions, except the lateral hypothalamus, show similarly staining material in the extracellular spaces.

Of anatomical interest is the close association of the aldehyde-fuchsin positive neurons with phylogenetically ancient cellular structures and fiber systems of the brain. In the squirrel monkey they would seem to provide a basis for further characterization of certain nuclei and new division of the amygdala.

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Abbreviations

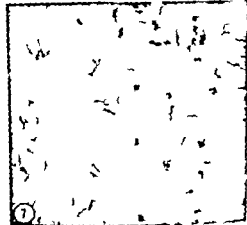
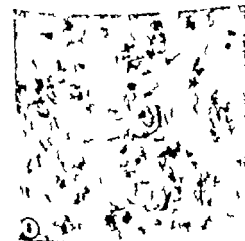
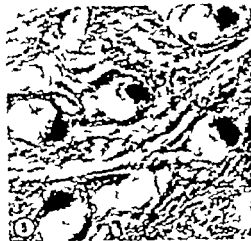
a, Artefact	MIAB, Accessory Basal Nucleus, Medial
B Basal Nucleus (amygdala)	Portion (amygdala)
Co Cortical Nucleus (amygdala)	N4 Nucleus of Trochlear Nerve
IC, Internal Capsule	ST Stria Terminalis

PLATE 1

EXPLANATION OF FIGURES

All sections are stained with aldehyde-fuchsin unless otherwise indicated.

- 1 Section from the amygdala in region of stria terminalis (ST) showing portions of the medial accessory basal nucleus (MIAB) and cortical nucleus (Co). It is in this area surrounding the stria terminalis that granulation is heaviest. a-artefact 100 X.
- 2 A Type A cell from amygdala showing a single compact mass of granules. 1,100 X
- 3 A Type C cell from the amygdala showing dispersed arrangement of granules. 1,100 X
- 4 Opposed photographs from a section through amygdala showing striking contrast between the positively staining medial accessory basal nucleus (MIAB) and the negative basal nucleus (B) 100 X.
- 5 Medial accessory basal nucleus of the amygdala stained with Sudan black B 1,100 X
- 6 Nucleus septalis triangularis. In addition to neurons, granules are found in glia cells and in interstitial tissue. 400 X
- 7 Subfornical organ. In this case there was heavy accumulation of AFP material in the interstitial spaces. 400 X.



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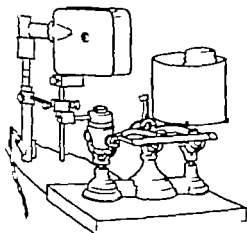


Fig. 5 Focusing apparatus completed. Microscope with camera and beam-splitter above it, supported on vertical steel rod that permits sliding movements of the two instruments for fine preliminary focusing. This rod in turn is attached to the arm of a balance by joint that allows vertical movement on a horizontal ball-bearing axle to take place in the combination of movements in response to the rise and fall of the rib in breathing. The load upon the thorax will made by the rib-stays, microscope, beam-splitter and camera, had to be removed in order to avoid interference with respiration, and the following counterbalance was devised. A common type of commercial balance, without the pan, was modified for the purpose by substituting ball-bearings in place of the knife-edge of its beam, and in place of the pan, a metal jar containing number 8 shot. Thus a perfect balance was provided between the weight of the instruments connected with, and bearing upon the chest-wall, and the weight of the jar of shot. In these means an accurate focus on the lungs of the breathing cat was maintained.

Special apparatus used in a few experiments has been described in the protocols.

OBSERVATIONS

Mammalia

White rat (*Rattus norvegicus* Berkman)
In 38 experiments made during April '21 and June '23 on the living rat, a peculiar movement of the pipette which had been thrust into the lung was noted. If the lung were tapped near the heart, there were two oscillations of the pipette

one synchronous with the heart-beat, the other caused by a momentary pause at the beginning of inspiration.

Columns of clear or sanguinous fluid, interrupted by empty spaces, appeared in pipettes that had been thrust into the lobules of the lung.

Cat (*Felis domestica*, Briss) In 39 experiments capillary pipettes were inserted into the lungs of anesthetized cats. By measuring the thickness of the pleura and subserous coat in sections of the cat's lung, and by making casts of the bronchial system, data were obtained for designing pipettes that would project beyond their handles to enter but not to pass through a superficial lobule. Experiments in which a dye was injected into the lung from the trachea showed that such pipettes reached the interior of the lung lobule. The experimental procedure consisted in exposing approximately 1 sq cm of parietal pleura in the V and VII intercostal space while constantly observing the blood pressure as indicated by a mercury manometer connected with the left common carotid artery and the respiratory movements as recorded on a drum by a tambour. Pipettes were inserted into the lung, either through the intact pleura or after opening the pleural cavity. A total of 268 pipettes were thus inserted, and of this number 184 or 69% contained clear fluid upon withdrawal.

Twenty two experiments were performed to determine the relative humidity of the air in the trachea during expiration and inspiration. The apparatus depicted in figure 2 was inserted between the cut ends of the severed trachea to collect and measure the water vapor present in the inspired and expired air. No measurable differences were observed.

In five experiments motion pictures of the lung lobule were made during the process of respiration by use of the thoracic window described under materials and methods. The experiment required approximately two hours to perform and autopsy revealed little evidence of damage to the lung at the site of the window. No signs of expansion or contraction of the lung lobule were seen in the motion pictures.

During the period 29 9 53—6:2:57 many experiments were made by Remy's reduced methylene blue method in search of evidence of fluid in the terminal bronchioles of the cat. Of these trials in which only the smallest caliber pipettes could be used, 21 retrieved a very short column of clear fluid.

There were 127 experiments on *Mammalia* recorded

Reptilia

Turtles Cumberland terrapin (*Pseudemys elegans* Wied) painted turtle (*Chrysemys marginata* Agassiz) The anatomy of the turtle's lung and its relations to other viscera made intubation impossible and other methods were devised. Two approaches were selected (a) removal of the plastron and (b) trephining the carapace.

In the first tests ('30-'33) the plastron was removed under anesthesia and the lungs exposed. An opening was made by electro-cautery in the sinus-wall and its internal surface away from the opening was inspected. It was found to be wet and clear fluid could be collected by touching it with capillary pipettes. Search for parasites (routine in these experiments) yielded none. Approach to the lungs by removal of the plastron is recorded for 25 experiments.

Frequently employed was the method of exposing the lungs through openings made in the carapace. Two square openings 2 by 2 cm were made in the cephalic part of the carapace located 1.5 to 2 cm right and left of the midline. A little dissection of peripulmonary tissues revealed the lungs. Through a circular aperture made in the lung by electro-cautery smooth-end capillary pipettes were introduced to make contact with the walls of the vestibule and with the septa between the sinuses at a distance from the aperture of entrance. There are 20 records of this method and results. A protocol of an experiment by each of the two methods follows.

11 2 33 *Chrysemys marginata* Spinal cord pithed at atlanto-occipital joint. Plastron removed. Sharp pipettes primed with paraffine oil were inserted into the caudal end of the left lung. Clear fluid with

drawn. Through a small hole made electro-cautery in wall of cephalic end right lung six smooth-end pipettes primed with paraffine oil were inserted, as swept gently over surfaces away from the opening. On withdrawal they were found to contain clear fluid. This experiment is cited for evidence of lung fluid: a turtle that was pithed—no anesthet.

4 4 51 *Chrysemys marginata*. Femal Urethane 3 68 cm into right thigh 9:5 A.M. A piece 2 x 4 cm sawed out of middle of right half of carapace 10 50 opening in lung made by electro-cautery lung tapped with eight smooth-end pipette. Experiment ended 11:45 turtle was breathing and active. The results were recorded as follows:

Pip. no. 1	clear fluid	0.4 mm; bubb
Pip. no. 2	sanguin. fluid	0.1 mm; bubb
Pip. no. 3	clear fluid	1.0 mm; bubb
Pip. no. 4	clear fluid	0.7 mm; bubb
Pip. no. 5	sanguin. fluid	1.6 mm; bubb
Pip. no. 6	sanguin. fluid	0.1 mm; bubb
Pip. no. 7	nothing	
Pip. no. 8	clear fluid	1.0 mm; bubb

Alligator (*Alligator mississippiensis* Daudin) The outer wall of the alligator lung is very thick composed as it is of much connective tissue and smooth muscle conditions that made tapping with pipettes difficult and necessitated the use of special techniques.

26 3 51 *Alligator mississippiensis* Weight 160 g. Nembutal 0.1 cm intra abd., 10:12 A.M. 10 20 reptile on animal board body cavity opened by dorsal longitudinal incision right side and lung exposed. Small hole made in lung by electro-cautery 10:30 touched mucosa a spots away from this hole with eight smooth-end pipettes. Each pipette was in lung 30 seconds on removal end was stopped with vaseline. Experiment ended at 11 00 A.M. heart was beating through out breathing slight. Contents of pipettes were recorded as follows:

Pip. no. 1	lea fluid	4.5 mm; bubb
Pip. no. 2	lear fluid	1.0 mm; bubb
Pip. no. 3	lear fluid	5.0 mm; bubb
Pip. no. 4	clear fluid	1.5 mm; bubb
Pip. no. 5	le r fluid	0.8 mm; bubb
Pip. no. 6	lear fluid	8.0 mm; bubb
Pip. no. 7	nothing	
Pip. no. 8	nothing	

There were seven experiments on *Alligator*

Horned toad (*Phrynosoma cornutum*, L.) Only three living specimens of this desert inhabiting reptile were obtained.

12.38. *Phrynosoma cornutum*. Weight 4g. Urethane intra abd. Respirations 18 per minute. Opened body cavity ventrally to observe entrance of cannulae into lung. Chose trachea for intubation and introduced cannulae, containing fine pipettes, into left and right bronchi and pushed them into cavities of lungs. With few from right lung columns of clear fluid, sanguinous fluid, blood from the left lung withdrew 1.5 mm clear fluid. Heart beating at close of experiment, 11 40 A.M.

There were 55 recorded experiments on lizards.

Amphibia

Frog (*Rana catesbeiana* Shaw bullfrog; *L. douglasii* Latreille green frog *R. pipiens*, Schreber leopard frog) In preparation for several kinds of experiments frogs were pithed or decerebrated in other cases anesthesia was produced by intra-abdominal injection of urethane. Some experiments caused no pain and anesthesia was unnecessary. Rhythm of heart beat and respiratory actions of mouth and body walls were noted. The lung was exposed in many experiments by an opening made either dorsally or ventrally through the body-wall, and exposed with capillary pipettes. Such experiments gave some evidence of the pressure in the sinuses of a clear fluid, but once in the sinuses of a clear fluid, the failure to control bleeding led to the abandonment of this method of tapping in the frog after a total of 20 experiments.

Intubation was first tried in the summer of '33 and used again in the spring of '38 with improvements of the apparatus employed. Anesthesia (urethane) was used in most cases, but in some this simple intubation operation was done without it. A metal cannula 1 cm long having an outside diameter a little less than that of the glottidis provided with a handle was slipped through the rima into the lung. A glass tube 8 cm long with an outside diameter somewhat less than that of the bore of the cannula, was used as a sheath-tube to protect the pipette when

entering the lung. The distal entering-end of this sheath-tube was smoothed and its lumen closed by a very thin celloidin diaphragm.

In performing the experiment on a living frog the sheath-tube with a pipette inside and its smooth end arrested by the celloidin diaphragm was pushed through the cannula and into the central cavity of the lung. The pipette was then thrust through the diaphragm and beyond about 1 cm when contact of its tip with the free margins of septa was sought by moving the sheath-tube gently in all directions. This operation was continued for not more than half a minute. The smooth point of the pipette came into contact with nothing but the celloidin diaphragm until it was free in the central cavity of the lung. The intubation method was carried out successfully in 18 experiments on bullfrogs during March '30 and results were consistently positive that a clear fluid was obtained.

1.3.51 *Rana catesbeiana* This frog was moribund when the intubation experiment was made. Results: Contents of pipettes nos. (1) 0; (2) 0 (3) 1 mm column clear fluid (4) 0 (5) bubble.

29.4.53. *Rana catesbeiana* Anesthetic urethane 6.5 cm³ into thigh. 0.00 A.M. Prone on animal-board 9:50. Respirations none. Glottis cocainized 10:10. Inverted cannula in rima glottidis at 10:15 and through it four pipettes with smooth tips and calibers 0.4-0.5 mm were inserted into right lung, each pipette was left for two minutes. Right lung was exposed at 10:40 and tip of cannula located one-third of its length within the lung, which was empty of gas and relaxed. The heart beating had ceased. Breathing of left lung was a repetition in all respects of the method used for exploring right lung, and the results were similar. This frog was kept empty on water in the cold tank was injected with a dose of urethane. A trace of urethane was drawn into the right pipette while exploring the two lungs. This was a result of similar experiences in the past, accident or to faulty technique.

On March 6 9 16 45 three experiments were undertaken to learn something more of the movement of the lungs and their sinuses. In preparation, a bullfrog was placed upon a meshed-wire frame and 1 cm of lipoidol was injected via the rima glottidis into the lungs. Observing that the heart action and rhythm of breathing were regular and rate unaffected it was clearly shown (a) that the lungs expanded cephalad in inspiration and (b) that the sinuses expanded approximately one-quarter of their diameters both dimensions retracting on expiration.

Parasites within the cavity of the frog's lung were encountered in many experiments. These all trematode flukes were found in both lungs in the central cavity and in the sinuses. The largest number observed in one frog was three. These parasites were active and moved about in a conspicuous surrounding of fluid filled with bubbles. Lungs were apparently healthy no thickening of sinus-walls or presence of congested blood-vessels were observed. Dr Alfred Lucas identified the flukes as *Hematotylechus mediotenus*.

In the period May '51 to February '52 a series of experiments (started in St. Louis) was made with bullfrog tadpoles to learn whether water was present in their lungs when they came to the surface.

11 5 51 Living tadpoles 7-8 cm long were put in a bowl containing 1 400 cm of tap-water. They swam about, rose to the surface at intervals of 3 to 4 minutes. One was transferred to a second bowl for a control. Lamp black, 2.5 g was mixed with the water in the first bowl. From this tadpoles were removed on May 12th 14th 15th 16th and sacrificed fixed in 10% formalin cut in serial transverse sections 10 μ through lungs in situ and stained with hematoxylin and eosin. The control animal was prepared by the same technique. Study of these sections was begun in the Department of Anatomy Harvard Medical School (31 7 51) on the invitation of Professor George Wislocki. On his suggestion another series of sections was cut from the same specimen and stained with Mayer's paracarmine. Under the microscope there were many particles visible in the tissues and cavities

of the lung, some large some small, with rough irregular edges. Also present were black granules in the open spaces of the lung. With high magnification these granules appeared separate from any cells in their vicinity.

27 8 51 *Trypan blue indicator* Sacrificed two tadpoles rima glottidis and right gill-cover closed, that had lived 75 minutes in a 1% solution of trypan blue-dissected them to expose ventral aspect of lungs. Removed cart. basihyal., made transverse opening in larynx, and introduced capillary pipette primed with mineral oil, into right bronchus and cavity of lung withdrew blue-colored fluid. Tapped left lung, drawing 4 mm of blue-colored fluid.

Prussian blue indicator Tadpoles were immersed in a 1% solution of potassium ferrocyanide for varying periods. Sought fluid in lung by capillary pipettes introduced via larynx. Fluid found present and ferric chloride was then drawn into the pipette. Zone of contact of lung fluid and reagent the criterion: appearance of Prussian blue.

Tadpole no 2 Immersed in potassium ferrocyanide solution two hours 90 minutes. Living. Lungs tapped: from one drew a 7 mm column of fluid that formed a blue zone on contact with ferric chloride.

Tadpole no 4 Urethane anesthesia. Each lung tapped by one capillary pipette. Fluid withdrawn in both gave positive reaction with Prussian blue test.

There were 15 experiments on bullfrog tadpoles using the Prussian blue and trypan blue indicators in all of which clear fluid was withdrawn from the air spaces of the lung.

Madpuppy (Necturus maculosus Rafinesque) Eleven specimens of this perennibranch were obtained four were moribund and discarded. The method used in exploring the lungs was the same in the seven specimens examined. Under urethane anesthesia, the body-cavity was opened ventrally and the paired, sac-like lungs were tapped with capillary pipettes. The first experiment, May 8 '33 specimen a female revealed both lungs distended. Tapping the right lung resulted in filling the pipette with a column of clear fluid with a little blood 4 cm high; the lung was

filled with fluid. From the left lung were drawn a few short columns of clear fluid, and bubbles. In the other six active specimens the lungs were found expanded and short columns of clear fluid separated by bubbles were withdrawn.

There were 149 experiments on Amphibians made in the present study exclusive of the many tapping experiments that were performed.

REVIEW OF THE LITERATURE

In the literature on respiration in animals an association of this function with water appears to have been recognized by many investigators. Moist respiratory surfaces were described by Leclard (1815) Bernard (cited by Duval, 1875) Schrwald (1886) Bohr ('00) Köppen ('21) Luciani ('11) Winternitz and Smith ('19) Yermhoff ('21) Colosi ('27 '28a, b '30) Wigglesworth ('29 '30 '31 '30) Powers et al. ('32) Clara ('36) Letner ('38) Krogh ('41) Macklin ('36) Lee ('30). Movements of dust-cells and macrophages within or out of the alveolus are described by a number of investigators. Mechnikoff ('05) Haythorn ('13-'14) Permar ('20-'21) Fried ('27) Maximow and Bloom ('30) Ross ('39) Low ('53) Phagocytic activities of free cells in the alveolus are recorded by Mavrogordato ('18) Sewell ('18-'19) Cappell ('23 '29) Mitosis of cells within the alveolus is cited by Seeman ('31) and by many others. Liljestrand and Sahstedt ('24) found nearly complete saturation of the air in man's trachea both in inspiration and expiration (also reported by Perwitschky '27). The presence of amniotic fluid in the lung has been found by Wialocki ('21) Bremer ('35) Snyder and Rosenfeld ('37) and Snyder ('41 '49) MacDougall and Hegner ('43) found water in the cloacal respiration of hibernating turtles. Boyd and Johnston ('40) discovered that the difference between the weight of the fresh and dried human lung was large and seasonally consistent. Concerning the musculature of the lung Ogawa ('20) found circularly arranged fibers around collecting ducts in many mammals. Baldisberger ('21) described smooth muscle surrounding respiratory bronchioles. Macklin ('22) de-

scribed movements and form changes in the bronchial tree in human respiration. Hayek ('50) stressed the wide-spread distribution of smooth muscle in the human lung. He discussed the origin of secretion in the terminal branches in the absence of goblet cells and gave the evidence of Clara ('36) and Macklin ('34) that it is a secretory process of ciliated epithelium and liquidating cells. Scholander ('60) found the rate of oxygen transport enhanced by diffusion through water and by mediation of hemoglobin molecules which may carry over more than eight times as much oxygen as in straight diffusion.

SUMMARY AND CONCLUSIONS

The experiments on the white rat revealed the momentary pause in inspiration in normal breathing.

Motion pictures made on cats during successive phases of inspiration and expiration revealed no evidence of expansion and contraction of alveoli. The expansion and contraction of the lung as a whole appears to function in the filling and emptying of air in the bronchi up to the level of the pulmonary lobule.

The cat's lung is pervaded throughout with smooth muscle. It is suggested that this musculature functions in preventing the pressure of the inspired air from suddenly falling off as it passes from the narrow lumen of the trachea into the wide spaces of the lung and that this is accomplished by the constriction of the bronchi and the atrial openings in expiration, thereby establishing a partial pressure of oxygen in the alveoli that facilitates its solution.

The pneumograph curve registering the respiratory movements of the thoracic wall showed a pause in inspiration lasting but the fraction of a second before continuing its course. This phenomenon was first observed in my experiments on the white rat and has since been noted in several instances when the cat was the subject (fig. 3). It is conceived that at the moment of the pause the rima glottidis closes; that in this fraction of a second, under intrathoracic pressure a phenomenon, suggestive of the dew-point, occurs

in the alveolus, and that molecules of oxygen in watery solution enter the blood of the pulmonary capillaries.

In the experiments on the turtle it was found that strata of clear fluid, bubbles and empty spaces occupied the pipettes that had made contact with the walls of both vestibule and sinus of the lung. All experiments save one, were made on an anesthetized turtles the exception, *C. marginata* pithed yielded clear fluid in six pipettes.

In tapping the lungs of the alligator many pipettes withdrew short columns of clear fluid interspersed with or followed by bubbles.

The lungs of the desert-inhabiting lizard *Phrynosoma cornutum* yielded columns of clear and flocculent fluid.

On the respiratory surfaces of the lungs of the adult frog a thin stratum of clear fluid was demonstrated by several methods. Intubation overcame the chance of contamination by blood and gave convincing evidence of wet respiratory surfaces. In breathing, the frog's lung moves cephalad on expanding in inspiration the alveoli expand about one quarter of their diameters both dimensions retracting in expiration. During the experiments on moribund and dead frogs very little fluid or none at all appeared in the pipettes on their withdrawal from the lung negative evidence supporting the claim of a normal physiological condition.

The experiments on tadpoles yielded evidence that with the closing of the gill clefts the lungs became filled with water drawn into them from the medium in which the tadpoles were immersed. From this source oxygen may enter the blood in the pulmonary circulation. A later state in the respiratory evolution is indicated by the tadpole repeated risings to the surface the head entering the atmosphere.

Whereas fluid was found in the sac-like lungs of *Necturus* the extreme differences in the amounts call for explanation that the limited material examined thus far cannot supply.

The respiration of fishes and the myriad aquatic invertebrates is dependent upon the oxygen dissolved in the seas lakes and rivers. Inter-tidal invertebrates and land invading fishes maintain a wet environ-

ment of their respiratory membranes. Terrestrial isopods and insects have wet respiratory organs. Advance toward air breathing is manifest in the fish *Ceratodus* by its possession of primitive lungs. In amphibians the skin functions in respiration both in the air and in the water vital to these animals during hibernation. The habitat of *Siren* is the mud of marshes of *Necturus* the depths of lakes and streams. Oxygen is in aqueous solutions in the lungs of reptiles and in the cloacal sac of certain hibernating turtles. It has been shown that the air-spaces of the lungs of chick-embryos are receptive to amniotic fluid. Watery fluid in the air passages of the lungs of mammalian embryos including man is recorded. The lungs of living adult mammals tolerate large quantities of water injected into them and dispose of it through the blood-circulation a fact that may be found of significance in the treatment of a drowning man.

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Pathways of Intestinal Lymph Drainage in Normal Sheep and in Sheep Following Thoracic Duct Occlusion¹

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ABSTRACT The pathways by which intestinal lymph enters the blood were studied with radiologic and radioactive tracer techniques in normal sheep and in sheep after thoracic duct occlusion. It was concluded that direct connections between the intestinal lymphatics and blood vessels in the abdomen and caudal thorax in normal sheep are very uncommon if they occur at all.

During the first few days after the thoracic duct of sheep was occluded in the thorax, transfer of protein from intestinal lymph to blood was slow. At this time, the abdominal lymphatics were grossly dilated and lymphatic valves incompetent. After about 1-3 weeks, the abdominal lymphatics were of more normal size and drainage of lymph protein to the blood occurred more rapidly. At least some of this protein entered the blood within lymph nodes. After 4-7 weeks, direct vascular connections between the thoracic duct and hemiazygos vein had developed.

It is generally assumed that all the lymph from the abdominal viscera and caudal portion of the body drains into the thoracic duct which conveys it to the great veins in the neck. However in some species direct connections between the lymph and blood vascular systems have been discovered in the abdominal region which suggests that some lymph from this region may drain into abdominal veins. Silvester (12) found connections between lymphatics and the inferior vena cava at the level of the renal veins in monkeys, and Job (18) found similar connections in rats. In studies of fat absorption in sheep Heath and Morris ('62) were able to recover in thoracic duct lymph only about one-half the fat absorbed from the intestine. Failure to recover all the fat might be explained by the presence of lymphatic venous connections distal to the point of lymph collection. This paper describes the results of a series of experiments performed to determine whether such connections do in fact exist in sheep.

Two general approaches were used to provide an answer to this question. First, the amount of ¹²⁵I-labeled albumin that could be recovered in thoracic duct lymph following its injection into a mesenteric lymphatic was determined. Second the size and route of passage into the bloodstream of tracer substances injected into a

mesenteric lymphatic was studied at various time intervals after occlusion of the thoracic duct. It was anticipated that the results of these experiments would disclose (a) whether lymphatic venous connections exist in the abdomen and caudal thorax in normal sheep and (b) the location and nature of connections which develop during an extended interval after occlusion of the thoracic duct. It has been shown previously in dogs that, after the thoracic duct is occluded the flow of lymph into the bloodstream is temporarily impeded (Gryaznova, '63) but that colateral lymphatics or lymphatic venous connections develop within a few weeks (Blalock, Robinson, Cunningham and Gray '37; Freeman, 42 Gryaznova, '63).

MATERIALS AND METHODS

The merino and crossbred ewes 1-6 years of age used in these experiments were restrained indoors in metabolism cages and had free access to water and alfalfa hay or chaff.

EXPERIMENTAL METHODS

Recovery of intestinal lymph in the thoracic duct. Cannulae were placed in the

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thoracic duct and a mesenteric lymphatic of 15 sheep. Five-tenth milliliter of a solution of ^{131}I labeled albumin (The Radiochemical Centre, Amersham, England) was washed into the mesenteric cannula with 0.5 ml of a solution of Evans Blue. The radioactivity in thoracic duct lymph collected during the next hour was measured and then compared with the total amount initially injected. The sheep were maintained under anesthesia during this procedure. All radioactivity measurements were made by GM counting.

Drainage of intestinal lymph after thoracic duct occlusion Nine of the sheep subjected to the procedure described above were used in these experiments. In all these sheep the labeled albumin injected into a mesenteric lymphatic was completely recovered in the thoracic duct lymph indicating that functioning lymphatic venous connections were not present along the route of the intestinal lymph. The thoracic duct cannulae were then tied off. At the same time the mesenteric cannula was removed and the lymphatic ligated except in one sheep (sheep A) in which the mesenteric cannula was left in place.

After 9-13 days three of these sheep were anesthetized and 0.5 ml ^{131}I labeled albumin was injected into a cannulated mesenteric lymphatic. At intervals up to 10 min thereafter blood samples were collected from either the caudal vena cava or the jugular vein and from veins draining lymph nodes in the abdomen. These experiments were performed to see whether following thoracic duct occlusion evidence could be obtained that proteins from intestinal lymph could pass to the blood within lymph nodes.

In sheep A 0.5 ml ^{131}I labeled albumin was injected into the indwelling mesenteric lymphatic cannula on each of five successive days after the thoracic duct was occluded. The levels of radioactivity in samples of jugular vein blood were measured at serial intervals up to an hour after each injection. Before each injection of labeled albumin, adequate functioning of the indwelling cannula was checked radiologically with an Image Intensifier (see below) by observing that contrast medium injected into the cannula flowed freely into

the efferent lymphatic. The sheep was not anesthetized during these experiments.

At intervals up to seven weeks after the thoracic duct was occluded each of the nine sheep was anesthetized, and 10-15 ml of water-soluble contrast medium (Diataglinol or Arteriodione May and Baker) was injected into a mesenteric lymphatic over a period of 10-15 min. The injection pressure was not measured. Mercury was substituted for the aqueous medium in two sheep examined four and seven weeks respectively after thoracic duct occlusion. The fate of the injected medium was observed directly with a Siemens Image Intensifier X-ray Unit. The course of the medium through the lymphatics was periodically recorded on non-screen film (Kodirex Kodak) without the use of a grid.

In order to observe the changes in lymph node structure following thoracic duct occlusion the ducts of three sheep were ligated and seven days later mesenteric renal and hepatic lymph nodes were removed. The nodes were fixed in 10% aqueous acrolein (Luft '59) and embedded in polyethylene glycol diacrylate (Sikman Motila and Feder '61). Sections were stained with hematoxylin and eosin.

In one sheep in which the thoracic duct had been occluded six weeks previously a solution of latex was injected into a mesenteric lymphatic and the distribution of latex in lymph and blood vessels observed at autopsy. In the two sheep in which mercury had been used as a contrast medium, the distribution of mercury was observed at autopsy.

Surgical techniques

The technique of Lascelles and Morris ('61) was used either to ligate or to cannulate the thoracic duct at the level of the ninth thoracic vertebra. To inject solutions into a mesenteric lymphatic a mesenteric lymph node was exteriorized through an incision 15 cm long in the right mid flank region. In contrast to their position in many other species these nodes in sheep are situated in the mesentery about 5 cm from the intestine (fig. 1). As a result efferent lymph from these nodes passes through a relatively long segment of lymphatic before reaching the thoracic duct. As the efferent lymphatics pass dorsally

sheep autopsied eight days after thoracic duct occlusion, a small amount of clotted lymph enclosed by a fibrous tissue capsule was found surrounding the thoracic duct caudal to the obstruction. This corresponded in position to the radiotranslucent area observed radiologically. It seemed likely that, during the first few days after the thoracic duct was occluded, lymph escaped through the walls of the dilated duct and became encapsulated. At autopsy however there was no sign of continuing extravasation.

In two sheep in which radiological evidence suggested the passage of mercury from the thoracic duct to the hemiazygos vein four and seven weeks after thoracic duct occlusion mercury was present in the hemiazygos vein at autopsy. In the first sheep mercury was also found in a small vessel joining the thoracic duct to the hemiazygos vein about 10 cm cranial to the diaphragm. In this sheep mercury was also found in a small vessel which extended from the thoracic duct to the caudal mediastinal lymph node. In the second sheep mercury was found in a small vessel which emerged from the thoracic duct just caudal to the site of occlusion and passed under the fibrous capsule of a lymph node adjacent to the hemiazygos vein. Because of difficulties in dissection however it was not possible to be sure whether the mercury which had entered the vein had passed along this vessel. Another sheep was anesthetized six weeks after thoracic duct occlusion and latex was injected through a mesenteric lymph cannula. The sheep was killed and the area of the thoracic duct dissected after fixation in formal-saline. Latex was found filling both the thoracic duct and a small vessel joining the thoracic duct to the hemiazygos vein just cranial to the diaphragm (fig. 3). A small amount of latex was also found in the vein.

DISCUSSION

In almost all cases in which labeled protein was injected into a mesenteric lymphatic in normal anesthetized sheep the protein was recovered quantitatively in the thoracic duct lymph indicating that protein was not leaving the intestinal

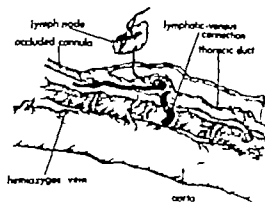


Fig. 3 Sketch of a lymphatic-venous connection in sheep, six weeks after thoracic duct occlusion. This connection between the thoracic duct and the hemiazygos vein was demonstrated after the thoracic duct was filled with latex.

lymphatics to enter the bloodstream in the abdomen or caudal thorax. If connections between intestinal lymphatics and veins were present in these animals they were closed and nonfunctional during the period of anesthesia. Threefoot, Kent and Hatchett ('63) suggested that lymphatic-venous connections may be under autonomic control and may open when the intralymphatic pressure exceeds a critical level. If this process occurs in sheep it is likely that any existing connections would have opened when the intralymphatic pressure increased following ligation of the thoracic duct. However when the thoracic duct was occluded, the abdominal lymphatics remained dilated for several days indicating that drainage of lymph to the bloodstream was severely impaired. In addition immediately after the thoracic duct was occluded transfer of labeled protein from the intestinal lymph to the bloodstream was slow. It is probable that the transfer which took place at this time represented protein which extravasated through the walls of the dilated lymphatics and was returned to the circulation by the right lymph duct (Volley and Courtice '56). Although under normal conditions the main lymphatic vessels are impermeable to large proteins (Mayerson, Patterson, McKee, Lelirlie and Mayerson '62), Courtice and Steinbeck ('51) have demonstrated that protein can extravasate from occluded lymphatics.

In normal lymph nodes of dogs the passage of proteins and of cells from lymph to blood is negligible (Mayerson, et al., '62; Sablston, Archer and Blalock, '63; Pressman, Siroon, Hand and Miller '63) have demonstrated the passage of plasma proteins into the efferent blood of dog cervical lymph nodes following intra nodal injection. In interpreting their results, it is important to consider the traumatic changes in lymph node structure which must follow the injection of relatively large volumes (2 ml) of material directly into lymph nodes. Following thoracic duct occlusion, abdominal lymph nodes become large and edematous and contain a decreased amount of lymphoid tissue (Lee '22; Blalock, Robinson, Cunningham and Gray '37). In the experiments described in the present paper extensive dilatation of medullary sinuses occurred in abdominal lymph nodes of sheep a week after thoracic duct occlusion. At this time the retrograde flow of intestinal lymph along efferent lymphatics draining intestinal, renal and lumbar nodes was demonstrated by radiological methods and the examination of efferent nodal blood indicated transfer of intestinal lymph protein to the bloodstream within these nodes. With the methods used, however it was not possible to identify a route within the lymph nodes by which lymph could reach the blood.

These pathways of lymph drainage were replaced later by direct connections between the thoracic duct and hemiazygos vein just caudal to the site at which the thoracic duct had been occluded. Connections of this type have been shown to function in cats, dogs and rats within the first two months after thoracic duct occlusion (Lee '22; Blalock et al. '37; Threefoot, Kent and Hatchett, '63). Yoffey and Courtice ('56) suggested that these anastomotic connections may be enlargements of pathways normally present. Pathways of this type however could not be demonstrated in normal sheep.

In the experiments of Heath and Morris ('62) on the absorption of fat in sheep only about one-half of the fat absorbed from the gut could be recovered from chronic thoracic duct fistulae. It has been

suggested that some of the fat which was absorbed into the lymph may have entered the blood through alternate pathways and escaped collection. The evidence presented in this paper however indicates that all, or very nearly all, of the lymph from the intestines of sheep is collected from a freely flowing cannula in the thoracic duct. It is possible that if this cannula is temporarily occluded (e.g. by fibrin clots) alternate means of drainage such as those observed in these experiments, may develop. If this did occur quantitative collection of lymph would not be possible when free flow through the cannula was again established. However in the experiments of Heath and Morris ('62) the thoracic duct cannulae were rarely occluded and never for more than a few hours. The evidence presented here indicates that total obstruction to lymph flow for at least several days is necessary before alternate pathways develop for the rapid drainage of intestinal lymph. For these reasons it is thought unlikely that lymphatic-venous connections of any type played a part in their experiments. In sheep therefore the portal vein must be considered as a possible route for the transport of a portion of the fat which is absorbed from the gut.

SUMMARY

The results of tracer experiments performed on normal sheep and on sheep after thoracic duct occlusion indicate that direct connections between the intestinal lymphatics and the bloodstream in the abdomen and caudal thorax of sheep are very uncommon if they occur at all.

When the thoracic duct of sheep was occluded, during the first few days the lymphatics distal to the obstruction were widely dilated and the valves incompetent. Transfer of proteins from intestinal lymph to blood was slow. After about 1-2 weeks, the abdominal lymphatics were of more normal size and drainage of protein from lymph to blood more rapid. At least some of this protein entered the bloodstream within lymph nodes. After 4-7 weeks, direct vascular connections between the thoracic duct and hemiazygos vein had developed.

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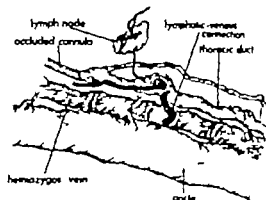


Fig. 3 Sketch of lymphatic-venous connection in a sheep, six weeks after thoracic duct occlusion. This connection between the thoracic duct and the hemiazygos vein was demonstrated after the thoracic duct was filled with latex.

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